| Case 16-19838 Doc 1 Fill in this information to identify your case: | Filed 06/17/16  | Entered 06/17/16 09:24:45<br>age 1 of 70 | Desc Main                          |
|---|---|--|------------------------------------|
| United States Bankruptcy Court for the:                             |   |  |                                    |
| Northern District of: Illinois (State)                              | <u> </u>  |  |                                    |
| Case number (if known)  | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 |  | Check if this is an amended filing |

## Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself   |                               |   |
|---|-------------------------------|---|
|   | About Debtor 1:               | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your full name   | Lecrecia<br>First name        | First name                                    |
| Write the name that is on<br>your government-issued<br>picture identification (for<br>example, your driver's<br>license or passport | Middle name  Nesbit Last name | Middle name  Last name                        |
| Bring your picture identification to your meeting with the trustee.   | Suffix (Sr., Jr., II, III)    | Suffix (Sr., Jr., II, III)                    |
| 2. All other names you  |                               |   |
| have used in the last   | First name                    | First name                                    |
| 8 years   | Middle name                   | Middle name                                   |
| Include your married or   | Middle name                   | Middle name                                   |
| maiden names.   | Last name                     | Last name                                     |
|   | First name                    | First name                                    |
|   | Middle name                   | Middle name                                   |
|   | Last name                     | Last name                                     |
| 3. Only the last 4 digits of your Social  | XXX - XX                      | xxx - xx-                                     |
| Security number or  | OR                            | OR  |
| federal Individual<br>Taxpayer<br>Identification<br>number (ITIN)   | 9 xx - xx-                    | 9 xx - xx-                                    |

Lecreci Case 16-19838 Doc 1 Filed 06/48/7/16 Entered 06/417/116/09:24:45 Desc Main Debtor 1 Page 2 of 70 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 8220 S. Honore Number Street Number Street 60620 Chicago Illinois City State Zip Code City State Zip Code Cook County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City Zip Code State City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived district to file for Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Debtor 1 Lecreci Case 16-19838 Doc 1 Filed 06/43/16 Entered 06/41/16/09/24:45 Desc Main

Document Document Page 3 of 70 Tell the Court About Your Bankruptcy Case Part 2: 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for No. bankruptcy within the last 8 years? Yes. District Case number District Case number District When Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with you, or by a Debtor Relationship to you business partner, or District Case number, if known by an affiliate? 11. Do you rent your No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

this bankruptcy petition.

Lecreci Case 16-19838 Doc 1 Filed 06/4s7/16 Entered 06/417/116/09:24:45 Desc Main Debtor 1 Page 4 of 70 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building

that needs urgent

repairs?

State

City

Zip Code

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Explain Your Efforts to Receive a Briefing About Credit Counseling

## 15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About Debtor 1:                                |  | Abo  | out Debtor 2 (S   | pouse Only in a Joint Case):   |  |  |
|--|--|--|---|--|--|--|
| You must check one:                            |  | You  | must check one:   |  |  |  |
| counseling agenc                               | ng from an approved credit<br>y within the 180 days before I filed this<br>on, and I received a certificate of   |  | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.    |  |  |  |
| Attach a copy of the that you developed        | certificate and the payment plan, if any, with the agency.   |  | Attach a copy of the that you developed   | certificate and the payment plan, if any, with the agency.   |  |  |
| counseling agenc                               | ng from an approved credit<br>y within the 180 days before I filed this<br>on, but I do not have a certificate of  |  | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. |  |  |  |
| -  | r you file this bankruptcy petition,<br>by of the certificate and payment  |  | •   | you file this bankruptcy petition,<br>by of the certificate and payment  |  |  |
| an approved ager services during the           | ed for credit counseling services from<br>ncy, but was unable to obtain those<br>ne 7 days after I made my request, and<br>nces merit a 30-day temporary waiver<br>nt.         | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.                            |   |  |  |  |
| attach a separate sl<br>obtain the briefing, v | temporary waiver of the requirement,<br>neet explaining what efforts you made to<br>why you were unable to obtain it before you<br>and what exigent circumstances required     | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. |   |  |  |  |
| •  | dismissed if the court is dissatisfied with<br>treceiving a briefing before you filed for  | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.  |   |  |  |  |
| receive a briefing w<br>certificate from the   | ed with your reasons, you must still ithin 30 days after you file. You must file a approved agency, along with a copy of the eveloped, if any. If you do not do so, your ssed. |  | receive a briefing w<br>certificate from the  | ed with your reasons, you must still ithin 30 days after you file. You must file a approved agency, along with a copy of the eveloped, if any. If you do not do so, your ssed. |  |  |
| Any extension of the and is limited to a m     | e 30-day deadline is granted only for cause aximum of 15 days.   | Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.   |   |  |  |  |
| I am not required counseling becau             | to receive a briefing about credit use of:   |  | I am not required counseling becau  | to receive a briefing about credit use of:   |  |  |
| Incapacity.                                    | I have a mental illness or a mental<br>deficiency that makes me incapable of<br>realizing or making rational decisions<br>about finances.                                      |  | Incapacity.   | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.   |  |  |
| ☐ Disability.                                  | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.               |  | Disability.   | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.               |  |  |
| Active duty.                                   | I am currently on active military duty in a military combat zone.  |  | Active duty.  | I am currently on active military duty in a military combat zone.  |  |  |

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit

counseling with the court.

If you believe you are not required to receive a briefing about

credit counseling, you must file a motion for waiver of credit

counseling with the court.

Lecreci Case 16-19838 Doc 1 Filed 06/437/16 Entered 06/417/116/09:24:45 Desc Main Debtor 1 Page 6 of 70 Document Document **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Lecrecia Nesbit Signature of Debtor 2 Signature of Debtor 1 Executed on 6/17/2016 Executed on

MM / DD / YYYY

MM / DD / YYYY

Debtor 1 Lecreci Case 16-19838 Doc 1 Filed 06/4s7/16 Entered 06/4s7/16 (09:24:45 Desc Main First Name Documents) Page 7 of 70

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

X

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| I have no know                        | ledge after an inquir | y that the infor | mation in | the schedul              | es filed with the petition is |
|---------------------------------------|-----------------------|------------------|-----------|--------------------------|-------------------------------|
| rrect.                                |                       |                  |           |                          |                               |
| /a/ Caran Manhada                     | <b>.</b> .            |                  | Б.        | C/47/0040                |                               |
| /s/ Sean McNul<br>Signature of Attorn |                       |                  | Date      | 6/17/2016<br>MM / DD / Y | -                             |
| oignature of Attori                   | icy for Debtor        |                  |           | IVIIVI / DD / I          | 111                           |
|                                       |                       |                  |           |                          |                               |
| Sean McNulty                          |                       |                  |           |                          |                               |
| Printed name                          |                       |                  |           |                          |                               |
| Semrad Law Firm                       |                       |                  |           |                          |                               |
| Firm name                             |                       |                  |           |                          |                               |
| 11101 S. Western /                    | Avenue                |                  |           |                          |                               |
| Street                                |                       |                  |           |                          |                               |
|                                       |                       |                  |           |                          |                               |
|                                       |                       |                  |           |                          |                               |
| Chicago                               |                       | Illinois         |           |                          | 60643                         |
| City                                  |                       | State            |           |                          | Zip Code                      |
| Contact phone                         |                       |                  | Е.        | 9                        |                               |
| Contact priorie                       |                       |                  | Er        | nail address             | smcnulty@semradlaw.com        |
|                                       |                       |                  | Illi      | nois                     |                               |
| Bar number                            |                       |                  |           | ate                      |                               |
|                                       |                       |                  |           |                          |                               |

Case 16-19838 <u>Doc 1 Filed 06/17/16 Entered 06/1</u>7/16 09:24:45 Desc Main Fill in this information to identify your case: Nesbit Debtor 1 Lecrecia First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$11,130.00 1b. Copy line 62, Total personal property, from Schedule A/B ...... \$11,130.00 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$17,602.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$536.12 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$24.069.00 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F...... \$42,207.12 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$3,574.44

5. Schedule J: Your Expenses (Official Form 106J)

Copy your combined monthly income from line 12 of Schedule I.....

Copy your monthly expenses from line 22, Column A, of Schedule J.....

\$3,049.00

Debtor 1 LecreciCase 16-19838 Doc 1 Filed 06/457/16 Entered 06/457/16 /09/24:45 Desc Main

Page 9 of 70 **Answer These Questions for Administrative and Statistical Records** Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$5,663.62 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$536.12 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$536.12

| Fill in thic                                  | Case 16-19838 s information to identify your case:  |  | ed 06/17/16  | Entered 06/1           | 7/16 09:24:45  | Desc Main   |                                |
|---|---|--|--|------------------------|--|---|--------------------------------|
|   |   |  |  | J                      |  |   |                                |
| Debtor 1                                      | Lecrecia  | Middle Now   | Nesbit   | -                      |  |   |                                |
| Debtor 2                                      | First Name  | Middle Nam   | ne Last N  | lame                   |  |   |                                |
|   | if filing) First Name   | Middle Nam   | ne Last N  | lame                   |  |   |                                |
| Jnited St                                     | tates Bankruptcy Court for the:   | Northern   | District of III  |                        |  |   |                                |
| Case nun                                      |   |  | (0   | State)                 |  |   |                                |
| ,   | <u></u>   |  |  |                        |  | Check if this   | is an                          |
| Officia                                       | al Form 106A/B  |  |  |                        |  | amended filin   | ıg                             |
| 3che  | dule A/B: Proper  | rty  |  |                        |  |   | 12/1                           |
| esponsib<br>rite your<br>Part 1:<br>1. Do you | where you think it fits best. Be ble for supplying correct inform r name and case number (if kno Describe Each Residence own or have any legal or equipment. So, Go to Part 2 | nation. If more space<br>wn). Answer every c<br>e, Building, Lan | e is needed, attach a<br>question.<br>.d, or Other Real  | a separate sheet to th | or Have an Interes   | any additional pages,   |                                |
|   | Yes. Where is the property?   |  |  |                        |  |   |                                |
| 1.1   | Street address, if available, or o  |  | /hat is the property?  Single-family home  |                        | the amount of a  | secured claims or exemption<br>ny secured claims on <i>Sched</i><br><i>Have Claims Secured by P</i> | dule D:                        |
|   |   |  | Duplex or multi-unit Condominium or co Manufactured or mo  | poperative             | Current value entire property  |   |                                |
|   | Number Street  City State   | Zip Code   | Land Investment property Timeshare Other   | ,                      | interest (such   | nature of your ownership<br>as fee simple, tenancy by<br>or a life estate), if known.               | /                              |
|   |   | , , , , , , , , , , , , , , , , , , ,                            | /ho has an interest in Debtor 1 only Debtor 2 only Debtor 1 and Debtor | •                      | k one. Check if the Check if th | nis is community propert<br>uctions)  | у                              |
|   |   |  | ⊒<br>ther information yo≀<br>roperty identificatio   |                        | nis item, such as local  |   |                                |
| If you  | own or have more than one, list he  | •  |  |                        |  |   |                                |
| 1.2   | Street address, if available, or o  |  | /hat is the property' Single-family home Duplex or multi-unit Condominium or co  | t building             | the amount of a<br>Creditors Who<br>Current value  |   | dule D:<br>Property.<br>of the |
|   |   | Ē  | Manufactured or mo   | obile home             | entire property  | y? portion you ow   | n?<br>_                        |
|   | Number Street  City State   | Zip Code   | Investment property Timeshare Other  |                        | interest (such   | nature of your ownership<br>as fee simple, tenancy by<br>or a life estate), if known.               | /                              |
|   |   | -<br>W<br>-<br>-<br>-<br>-<br>-<br>-                             | /ho has an interest in Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the definition  | •                      | k one. Check if the (see instru  | nis is community propert<br>uctions)  | у                              |

Other information you wish to add about this item, such as local property identification number:

| Debtor 1 Lecreci Case 16-                           |  | Filed 06/41-7/116 Entered 06/41-7/116  | 09:24: <u>45 Des</u>  | c Main   |
|---|--|--|---|--|
| 1.3 Street address, if available                    | [  | Documering Page 11 of 70  What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home                        | Do not deduct secured of the amount of any secure Creditors Who Have Clat Current value of the entire property? | ·  |
| Number Street  City State                           | Zip Code   | Land Investment property Timeshare Other   | Describe the nature of interest (such as fee si the entireties, or a life                                       | mple, tenancy by   |
|   | ]<br>]<br>]<br>]   | Who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Other information you wish to add about this item, s | Check if this is col  | mmunity property   |
| you have attached for Part 1                        | e portion you own for all  Write that number here              | oroperty identification number: of your entries from Part 1, including any entries fo  |   |  |
|   | al or equitable interest in<br>b. If you lease a vehicle, also | any vehicles, whether they are registered or not? In report it on Schedule G: Executory Contracts and Unexples   |   |  |
| 3.1 Make<br>Model:<br>Year:                         | Hyundai<br>Santa Fe<br>2010                                    | Who has an interest in the property? Check one.  Debtor 1 only   | the amount of any secure  | laims or exemptions. Put<br>ed claims on <i>Schedule D:</i><br>aims Secured by Property. |
| Approximate mileage: Other information:             | 70000  | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see  | Current value of the entire property?<br>\$9975.00  | Current value of the portion you own?<br>\$9975.00                                       |
| 3.2 Make<br>Model:<br>Year:<br>Approximate mileage: |  | instructions)  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only  | the amount of any secure<br>Creditors Who Have Cla  | laims or exemptions. Put ed claims on Schedule D: eims Secured by Property.              |
| Other information:                                  |  | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  | Current value of the entire property?   | Current value of the portion you own?  |

| Debtor 1 | LecreciCase 16-19838 Doc 1                    | Filed 06/43/16 Entered 06/47/116                         | 6/09/24: <u>45 Des</u>                               | c Main                                |  |
|----------|---|--|--|---------------------------------------|--|
|          | First Name Middle Name                        | Document Page 12 of 70                                   |  |                                       |  |
| 3.3      | Make  | Who has an interest in the property? Check one.          | Do not deduct secured cl<br>the amount of any secure |                                       |  |
|          | Model: Year:                                  | Debtor 1 only  | •  | ims Secured by Property.              |  |
|          | Approximate mileage:                          |  | Creations vino have old                              | uno occarca by 1 reports.             |  |
|          |   | Debtor 2 only  | Current value of the                                 | Current value of the                  |  |
|          | Other information:                            | Debtor 1 and Debtor 2 only                               | entire property?                                     | portion you own?                      |  |
|          |   | At least one of the debtors and another                  |  |                                       |  |
|          |   | Check if this is community property (see instructions)   |  |                                       |  |
| 3.4      | Make  | Who has an interest in the property? Check               | Do not deduct secured cl                             | •                                     |  |
|          | Model: Year:                                  | one.   | the amount of any secure                             | ims Secured by Property.              |  |
|          | Approximate mileage:                          | Debtor 1 only  | Creditors Write Have Cla                             | iins Secured by Property.             |  |
|          | Approximate mileage.                          | Debtor 2 only  | Current value of the                                 | Current value of the                  |  |
|          | Other information:                            | Debtor 1 and Debtor 2 only                               | entire property?                                     | portion you own?                      |  |
|          |   | At least one of the debtors and another                  |  |                                       |  |
|          |   | Check if this is community property (see instructions)   |  |                                       |  |
| 4.1      | Make  | Who has an interest in the property? Check               | Do not deduct secured cl                             | aims or exemptions. Put               |  |
| 4.1      | MakeModel:                                    | Who has an interest in the property? Check one.          | Do not deduct secured cl<br>the amount of any secure | •                                     |  |
|          | Year:   | Debtor 1 only  |  | ims Secured by Property.              |  |
|          | Approximate mileage:                          | Debtor 2 only  |  |                                       |  |
|          | Other information:                            | Debtor 1 and Debtor 2 only                               | Current value of the entire property?                | Current value of the portion you own? |  |
|          | Other Information.                            | At least one of the debtors and another                  | —————  | portion you own?                      |  |
|          |   |  |  |                                       |  |
|          |   | Check if this is community property (see instructions)   |  |                                       |  |
| 4.2      | Make  | Who has an interest in the property? Check               | Do not deduct secured cl                             | ·                                     |  |
|          | Model:  | one.   | the amount of any secure                             |                                       |  |
|          | Year:   | Debtor 1 only  | Creditors Who Have Cla                               | ims Secured by Property.              |  |
|          | Approximate mileage:                          | Debtor 2 only  | Current value of the                                 | Current value of the                  |  |
|          | Other information:                            | Debtor 1 and Debtor 2 only                               | entire property?                                     | portion you own?                      |  |
|          |   | At least one of the debtors and another                  |  |                                       |  |
|          |   | Check if this is community property (see instructions)   |  |                                       |  |
| 5. Add   | the dollar value of the portion you own for a | III of your entries from Part 2, including any entries f | for pages  | 275.00                                |  |
|          | • •   | e  | . 9  | 975.00                                |  |

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**Describe Your Personal and Household Items** 

| D                      | o you own or ha                                       | ave any legal or equitable interest in any of the following items?   | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
|------------------------|---|--|--|
| 6                      | . Household goods                                     | and furnishings  |  |
|                        |   | liances, furniture, linens, china, kitchenware   |  |
|                        | No  |  |  |
| <b>✓</b>               | Yes. Describe   | Misc. Household Goods  | \$350.00   |
|                        | '. Electronics  | s and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music  |  |
|                        | No  | s and radios, addio, video, storeo, and digital equipment, computers, printers, scarnicis, music   |  |
| H                      |   | he et  |  |
| ✓                      | Yes. Describe   | Misc. Electronics  | \$150.00   |
|                        | stamp, coi  | ue and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; in, or baseball card collections; other collections, memorabilia, collectibles |  |
|                        | Yes. Describe   |  |  |
|                        | and kayak   | orts and hobbies otographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes s; carpentry tools; musical instruments                    |  |
| $\stackrel{L}{\vdash}$ | No  |  |  |
| Ш                      | Yes. Describe   |  |  |
| L                      | O. Firearms Examples: Pistols, rifle No Yes. Describe | es, shotguns, ammunition, and related equipment  |  |
|                        | 1. Clothes<br>Examples: Everyday of                   | clothes, furs, leather coats, designer wear, shoes, accessories  |  |
| ~                      | Yes. Describe   | Used Clothing  | \$225.00   |
|                        | •   |  | Value V. VV  |
|                        | 2. Jewelry Examples: Everyday je gold, silve          | ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,<br>r  |  |
|                        |   | Misc. Jewelry  | <b>#</b> 405.00  |
| _                      |   | ivinos. somon y  | \$125.00   |
| L                      | 3. Non-farm animals Examples: Dogs, cats              |  |  |
| ¥                      | No Describe   |  |  |
|                        | Yes. Describe   |  |  |
|                        | 4. Any other person                                   | al and household items you did not already list, including any health aids you did not list  |  |
|                        | Yes. Describe   |  |  |
|                        | E A alal Alac ala Harrisa                             | lug of all of years autoing from Dest 2 including any article for years were barrent at a large  |  |
|                        |   | lue of all of your entries from Part 3, including any entries for pages you have attached number here  | \$850.00   |

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**Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes 17.1. Checking account: Chase \$205.00 17.2. Checking account: 17.3. Savings account: Chase \$100.00 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ✓ No Institution or issuer name: Yes 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

| Deb |   | eci€ase 16                        | 5-19838                                | Doc 1             | Filed 0644s7416  |                        | <b>06/1</b> 17/116/09/24: <u>45</u> | Desc Main    |
|-----|---|-----------------------------------|--|-------------------|--|------------------------|-------------------------------------|--------------|
|     | First N   | Name                              |  | Middle Name       | Documetht <sup>me</sup>  | Page 15 o              |                                     |              |
| 20. | Governm<br>Negotiable<br>Non-negotiable<br>Non-negotiable |                                   |  |                   |  |                        |                                     |              |
|     |   | Give specific<br>nation about<br> | Issuer name                            | X.                |  |                        |                                     |              |
| 21. |   | ent or pension                    |  | eogh 401(k) 4     | 03(b), thrift savings accou                                    | nts or other nensi     | on or profit-sharing plans          |              |
|     | ✓ No  |                                   | , , _, , , , , , , , , , , , , , , , , | , og., 101(h), 1  | 00(D), timit davingo accou                                     | rito, or ourior porior | or or prom onaring plants           |              |
|     | Yes. I  | List each<br>unt separately.      | Type of acco                           |                   | Institution name:  |                        |                                     |              |
|     |   |                                   |  | ·                 |  |                        |                                     |              |
|     |   |                                   | Pension plai                           | n:                |  |                        |                                     |              |
|     |   |                                   | IRA:                                   |                   |  |                        |                                     |              |
|     |   |                                   | Retirement a                           | account:          |  |                        |                                     |              |
|     |   |                                   | Keogh:                                 |                   |  |                        |                                     |              |
|     |   |                                   | Additional ad                          | ccount:           |  |                        |                                     |              |
|     |   |                                   | Additional ad                          | ccount:           |  |                        |                                     |              |
| 22. | Your share<br>Examples                                    |                                   | eposits you h                          | ave made so th    | nat you may continue servio<br>public utilities (electric, gas |                        |                                     |              |
|     | Yes   |                                   |  |                   | Institution name:  |                        |                                     |              |
|     |   |                                   | Electric:                              |                   |  |                        |                                     |              |
|     |   |                                   | Gas:                                   |                   |  |                        |                                     |              |
|     |   |                                   | Heating oil:                           |                   |  |                        |                                     |              |
|     |   |                                   | Security dep                           | oosit on rental u | unit:  |                        |                                     |              |
|     |   |                                   | Prepaid rent                           | t:                |  |                        |                                     |              |
|     |   |                                   | Telephone:                             |                   |  |                        |                                     |              |
|     |   |                                   | Water:                                 |                   |  |                        |                                     |              |
|     |   |                                   | Rented furn                            | iture:            | <del></del>  |                        |                                     | <del>_</del> |
|     |   |                                   | Other:                                 |                   | -  |                        |                                     |              |
| 23. | Annuities   | s (A contract for                 | a periodic pa                          | yment of mone     | ey to you, either for life or fo                               | or a number of yea     | rs)                                 | _            |
|     | ✓ No  |                                   |  |                   |  | •                      |                                     |              |
|     | Yes   |                                   | Issuer name                            | e and description | on:  |                        |                                     |              |
|     |   |                                   |  |                   |  |                        |                                     |              |
|     |   |                                   |  |                   |  |                        |                                     |              |
|     |   |                                   |  |                   |  |                        |                                     |              |

| Debt | or 1     | Lecreci Carrier Name       | ase 1    | 6-19838   | Doc 1 Middle Name |              | 06/4:7/16<br>cumente                     |                   |                 | 6 (09;24: <u>45</u> | Desc Ma   | <u>ıin</u> |
|------|----------|----------------------------|----------|---|-------------------|--------------|--|-------------------|-----------------|---------------------|-----------|------------|
| 24.  |          |                            |          | ation IRA, in a<br>), 529A(b), and                      |                   | a qualifie   | d ABLE progra                            | m, or under a     | qualified sta   | te tuition program. |           |            |
|      |          | No<br>Yes                  | Institut | ion name and c  | lescription. Sep  | arately file | the records of a                         | ny interests.11 l | J.S.C. § 521(   | c):                 |           |            |
| 25.  | Tru      | sts, equita                | able or  | future interes  | ts in property    | (other th    | an anything lis                          | ed in line 1), a  | and rights or   | powers              |           |            |
|      | exe      | rcisable fo                | or your  | benefit   |                   |              |  |                   |                 |                     |           |            |
|      |          | Yes. Desc                  | ribe     |   |                   |              |  |                   |                 |                     |           |            |
| 26.  | Еха      |                            | rnet dor |   |                   |              | r intellectual pro<br>yalties and licens |                   | 5               |                     |           |            |
| 27.  |          |                            |          | s, and other germits, exclusive                         |                   |              | ssociation holdin                        | gs, liquor licens | ses, professio  | nal licenses        |           |            |
|      |          | No<br>Yes. Desc            | ribe     |   |                   |              |  |                   |                 |                     |           |            |
| Mor  | ey (     | or prope                   | erty o   | wed to you  | ?                 |              |  |                   |                 |                     |           |            |
| 28.  | Тах      | refunds ov                 | ved to   | you   |                   |              |  |                   |                 |                     |           |            |
|      |          |                            | pecific  | information   |                   |              |  |                   |                 | Federal:            | - <u></u> |            |
|      |          |                            |          | ncluding wheth<br>iled the returns                      | er                |              |  |                   |                 | State:              |           |            |
|      |          |                            |          | ears  |                   |              |  |                   |                 | Local:              |           |            |
| 29.  |          | nily suppor<br>nples: Past |          | lump sum alimo  | ony, spousal sup  | pport, child | I support, mainte                        | nance, divorce s  | settlement, pro | operty settlement   |           |            |
|      | Ħ        | No                         |          |   |                   |              |  |                   |                 | Alimony:            |           |            |
|      | Ш        | Yes. Give s                | pecific  | information   |                   |              |  |                   |                 | Maintenance:        | ·         |            |
|      |          |                            |          |   |                   |              |  |                   |                 | Support:            |           |            |
|      |          |                            |          |   |                   |              |  |                   |                 | Divorce settlement  | <u></u>   |            |
|      |          |                            |          |   |                   |              |  |                   |                 | Property settlemen  | t:        |            |
|      |          | <i>nples:</i> Unpa         | aid wag  | one owes you<br>es, disability ins<br>rity benefits; un | surance payme     |              | lity benefits, sick                      | pay, vacation pa  | ıy, workers' co | mpensation,         |           |            |
|      | <b> </b> | No Soci                    | ui Occu  | ing bondina, un   | paid iodi is you  | made 10 S    | OTHOUR CIDE                              |                   |                 |                     |           |            |
|      |          | Yes. Descr                 | ibe      |   |                   |              |  |                   |                 |                     |           |            |

| Debt | tor 1    | LecreciCase 16 First Name                            | 5-19838           | Doc 1<br>Middle Name | Filed 06/4s7/11  Document                                | 6 Entered 06/47/<br>Page 17 of 70  | 166/09:24: <u>45 D</u>       | esc Main   |
|------|----------|--|-------------------|----------------------|--|------------------------------------|------------------------------|--|
| 31.  |          | rests in insurance p<br>mples: Health, disabi        |                   | ance; health         |  | credit, homeowner's, or rente      | r's insurance                |  |
|      |          | No<br>Yes. Name the insura<br>of each policy and lis |                   |                      | Company name:  |                                    | Beneficiary:                 | Surrender or refund value:   |
| 32.  | If you   |  | of a living trust |                      | meone who has died<br>ceeds from a life insurand         | e policy, or are currently entitle | ed to receive                |  |
| 33.  |          |  |                   |                      | I have filed a lawsuit or<br>nce claims, or rights to su | made a demand for payme            | nt                           |  |
|      |          | No<br>Yes. Describe                                  |                   |                      |  |                                    |                              |  |
| 34.  | to s     | er contingent and uet off claims                     | unliquidated (    | claims of ev         | very nature, including                                   | counterclaims of the debtor        | and rights                   |  |
| 35.  |          | Yes. Describe financial assets yo                    | u did not alrea   | ady list             |  |                                    |                              |  |
|      |          | No<br>Yes. Describe                                  |                   |                      |  |                                    |                              |  |
| 36.  |          |  | -                 |                      |  | tries for pages you have at        |                              | \$305.00   |
| Part | 5:       | Describe Any B                                       | usiness-Re        | elated Pro           | pperty You Own or  | Have an Interest In. Li            | st any real estate ir        | ı Part 1.  |
| 37.  | Do y     | ou own or have an                                    | y legal or equ    | itable intere        | est in any business-rela                                 | ted property?                      |                              |  |
|      |          | No. Go to Part 6.<br>Yes. Go to line 38.             |                   |                      |  |                                    |                              | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38.  | <b>✓</b> | ounts receivable or                                  | commissions       | s you alread         | ly earned  |                                    |                              |  |
| 39.  | Offic    | Yes. Describe ce equipment, furn                     |                   |                      |  |                                    |                              |  |
|      |          | mples: Business-rela<br>No<br>Yes. Describe          | ted computers     | , software, m        | nodems, printers, copiers,                               | fax machines, rugs, telephone      | es, desks, chairs, electroni | c devices  |
|      |          |  |                   |                      |  |                                    |                              |  |

|              |                             | Lecreci Case 16 First Name                        |                   | Doc 1<br>Middle Name    | Filed 06/437/16 Document   | Page 18 of 70               | L6√09₩24: <u>45</u> D | esc Main                        |   |
|--------------|-----------------------------|---|-------------------|-------------------------|----------------------------|-----------------------------|-----------------------|---------------------------------|---|
| 40.          | Mac                         | chinery, fixtures, eq                             | uipment, sup      | plies you us            | se in business, and tools  | of your trade               |                       |                                 |   |
|              | $   \sqrt{} $               | No  |                   |                         |                            |                             |                       |                                 |   |
|              |                             | Yes. Describe                                     |                   |                         |                            |                             |                       |                                 |   |
| 41.          | Inve                        | entory  |                   |                         |                            |                             |                       |                                 |   |
|              | $   \overline{\checkmark} $ | No  |                   |                         |                            |                             |                       |                                 |   |
|              |                             | Yes. Describe                                     |                   |                         |                            |                             |                       |                                 |   |
| 42.          | Inte                        | rests in partnershi                               | ps or joint ve    | entures                 |                            |                             |                       |                                 |   |
|              | <b>✓</b>                    | No  |                   |                         |                            |                             |                       |                                 |   |
|              |                             | Yes. Give specific                                |                   |                         | Name of entity:            |                             | % of ownership:       |                                 |   |
|              |                             | information about                                 |                   |                         |                            |                             |                       |                                 | _ |
|              |                             | them  |                   |                         |                            |                             |                       |                                 |   |
|              |                             |   |                   | •                       |                            |                             |                       |                                 | _ |
| 43. <b>C</b> | Custo                       | omer lists, mailing                               | lists, or other   | r compilatio            | ns                         |                             |                       |                                 | _ |
|              | <b>✓</b>                    | _   | ,                 | •                       |                            |                             |                       |                                 |   |
|              | =                           |   | clude personal    | llv identifiable        | information (as defined in | 11 U.S.C. § 101(41A))?      |                       |                                 |   |
|              |                             | _   |                   | .,                      | (                          | 3 ( , , , .                 |                       |                                 |   |
|              |                             | ∐ No  |                   |                         |                            |                             |                       |                                 |   |
|              |                             | Yes. Descr  | ibe               |                         |                            |                             |                       |                                 | _ |
| 44.          | Any                         | business-related p                                | roperty you o     | did not alread          | dy list                    |                             |                       |                                 |   |
|              | <b> </b>                    | No  |                   |                         |                            |                             |                       |                                 |   |
|              | =                           | Yes. Give specific                                |                   | •                       |                            |                             |                       |                                 | _ |
|              | _                           | information                                       |                   | -                       |                            |                             |                       |                                 | _ |
|              |                             |   |                   |                         |                            |                             |                       |                                 | _ |
|              |                             |   |                   |                         |                            |                             |                       |                                 |   |
|              |                             |   |                   | •                       |                            |                             |                       |                                 | _ |
|              |                             |   |                   | •                       |                            |                             |                       |                                 | _ |
|              |                             |   |                   |                         |                            |                             |                       |                                 | _ |
|              |                             |   |                   |                         | .=                         |                             |                       |                                 |   |
|              |                             |   | •                 |                         |                            | for pages you have attach   |                       |                                 |   |
| Part         | 6:                          | Describe Any F                                    | arm- and (        | Commerciand, list it in | al Fishing-Related P       | roperty You Own or H        | lave an Interest In   | i.                              |   |
| 46.          |                             |   |                   |                         |                            | ercial fishing-related prop | ertv?                 |                                 |   |
|              |                             | No. Go to Part 7.                                 |                   |                         | •                          | Ş                           | -                     | Current value of the            | Э |
|              | H                           | Yes. Go to line 47.                               |                   |                         |                            |                             |                       | portion you own?                |   |
|              |                             | 100. 00 10 11.10 17.                              |                   |                         |                            |                             |                       | Do not deduct secured<br>claims | J |
|              |                             |   |                   |                         |                            |                             |                       | or exemptions                   |   |
| 47.          |                             | <b>m animals</b><br><i>mpl</i> es: Livestock, pou | ıltnı farm roja   | ad fich                 |                            |                             |                       |                                 |   |
|              |                             |   | anny, ranni-taise | 5U 11511                |                            |                             |                       |                                 |   |
|              |                             | No  |                   |                         |                            |                             |                       | 1                               |   |
|              | Ц                           | Yes. Describe                                     |                   |                         |                            |                             |                       |                                 |   |

| Deb          | tor 1    | Lecreci Case 16-1983 First Name                                    | 8 Doc 1<br>Middle Name   |                            | Entered 06/17/116/09/24:45<br>Page 19 of 70 | Desc     | Main         |
|--------------|----------|--|--------------------------|----------------------------|---|----------|--------------|
| 48.          | Cro      | ps-either growing or harves  | ted                      | Boodinent                  | 1 ago 10 01 70                              |          |              |
|              | <b>✓</b> | No   |                          |                            |   |          |              |
|              |          | Yes. Describe  |                          |                            |   |          |              |
| 49.          | Farr     | m and fishing equipment, im  | plements, mach           | inery, fixtures, and tools | of trade                                    |          |              |
|              | <b>✓</b> | No   |                          |                            |   |          |              |
|              |          | Yes. Describe  |                          |                            |   |          |              |
| 50.          | Farr     | m and fishing supplies, chen                                       | nicals, and feed         |                            |   |          |              |
|              | <b>✓</b> | No   |                          |                            |   |          |              |
|              |          | Yes. Describe  |                          |                            |   |          |              |
| 51.          | Any      | farm- and commercial fishir  | ng-related proper        | ty you did not already lis | st  |          |              |
|              | <b>✓</b> | No   |                          |                            |   |          |              |
|              |          | Yes. Describe  |                          |                            |   |          |              |
|              |          |  |                          |                            |   |          |              |
|              |          |  |                          |                            | for pages you have attached                 |          |              |
|              |          |  |                          |                            |   | <u>L</u> |              |
|              |          |  |                          |                            |   |          |              |
| Part         |          |  |                          |                            | nat You Did Not List Above                  |          |              |
| 53.          |          | you have other property of an<br>mples: Season tickets, country of |                          | not already list?          |   |          |              |
|              | <b>✓</b> | No   |                          |                            |   |          |              |
|              |          | Yes. Give specific   |                          |                            |   |          |              |
|              |          | information  |                          |                            |   |          |              |
|              |          |  |                          |                            |   | ſ        |              |
| 54. A        | dd th    | e dollar value of all of your e                                    | entries from Part        | 7. Write that number her   | ·e  |          |              |
|              |          |  |                          |                            |   |          |              |
|              |          |  |                          |                            |   |          |              |
| Part         | 8:       | List the Totals of Each  | Part of this F           | orm                        |   |          |              |
| 55. <b>F</b> | Part 1   | : Total real estate, line 2  |                          |                            |   |          |              |
| 56. <b>p</b> | oart 2   | total vehicles, line 5   |                          | \$9975.00                  |   |          |              |
| 57. <b>P</b> | art 3:   | : Total personal and househ  | old items, line 15       |                            |   |          |              |
| 58. <b>P</b> | art 4:   | : Total financial assets, line 3                                   | 6                        | \$305.00                   |   |          |              |
| 59. <b>F</b> | Part 5   | : Total business-related pro                                       | perty, line 45           |                            |   |          |              |
| 60. <b>F</b> | Part 6   | : Total farm- and fishing-rel                                      | ated property, lin       | ne 52                      |   |          |              |
| 61. <b>F</b> | Part 7   | : Total other property not lis                                     | sted, line 54            |                            |   |          |              |
| 62. 7        | Γotal    | personal property. Add lines                                       | 56 through 61            | \$11130.0                  | )   |          | + \$11130.00 |
|              |          |  |                          | 411130.0                   | Copy personal property to                   | otal ▶   |              |
|              |          |  |                          |                            |   |          | \$11130.00   |
| 63. <b>T</b> | otal c   | of all property on Schedule A                                      | <b>VB.</b> Add line 55 + | line 62                    |   |          |              |

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|--|--|--|--|---|--|---|
| Filli  | in this inform   | ation to identify your case:   |  | J   |  |   |
| Deb  | otor 1   | Lecrecia   |  | Nesbit  |  |   |
|  |  | First Name   | Middle Name  | Last Name   |  |   |
|  | otor 2<br>ouse, if filing)   | First Name   | Middle Name  | Last Name   |  |   |
| Unit   | ted States Ba  | nkruptcy Court for the:  | Northern D   | District of Illinois  |  |   |
|  | se number<br>nown)   |  |  | (State)   |  |   |
| Of   | ficial F   | Form 106C  |  |   | -  | Check if this is a amended filing   |
| Sc   | hedul  | C: The Prop  | erty You Claim   | as Exempt   |  | 12/1  |
| the for is to exercise the exer | each iten o state a s mpted up eive certa mption of perty is d t1: Ident Which set | additional pages, writer of property you class pecific dollar amount to the amount of an in benefits, and tax-100% of fair market etermined to exceed of the Property You of exemptions are you cleed claiming state and federal eclaiming federal exemptions. | im as exempt, you must as exempt. Alternative applicable statutory exempt retirement functivalue under a law that that amount, your exempt exe | umber (if known).  st specify the amount of rely, you may claim the filmit. Some exemptions ds—may be unlimited in a limits the exemption to emption would be limited in if your spouse is filing with you. | the exemption you<br>ull fair market value<br>—such as those fo<br>dollar amount. Ho<br>a particular dollar<br>to the applicable s | r health aids, rights to<br>wever, if you claim an<br>amount and the value of the |
|  |  | ription of the property an<br>lle A/B that lists this prop   | erty the portion you<br>own  | Amount of the exemption you Check only one box for each ex  |  | cific laws that allow exemption   |
|  |  |  | Copy the value from<br>Schedule A/B  |   |  |   |
|  | Brief  |  |  |   |  | 735 ILCS 5/12-1001(b)   |
|  | description  | Misc. Household Go   | ods \$350.00   | \$350.00  |  |   |
|  | Line from<br>Schedule A  | /B:06  |  | 100% of fair market value, applicable statutory limit   | up to any  |   |
|  | Brief  |  | ****   |   |  | 735 ILCS 5/12-1001(a)   |
|  | description  | Used Clothing  | \$225.00   | \$225.00  | ·  |   |
|  | Line from<br>Schedule A  | /B: <u>11</u>  |  | 100% of fair market value, applicable statutory limit   | up to any  |   |
| 3.   | (Subject to  | adjustment on 4/01/19 and e  | , ,  | 5?<br>es filed on or after the date of adjust<br>n 1,215 days before you filed this o   | ,  |   |

Debtor 1 Lecreci Case 16-19838 Doc 1 Filed 06/437/16 Entered 06/47/16/09:24:45 Desc Main

Page 21 of 70 Documetht me Part 2: **Additional Page** Brief description of the property and line Current value of Amount of the exemption you claim Specific laws that allow exemption on Schedule A/B that lists this property the portion you Check only one box for each exemption. own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$125.00  $\overline{\mathbf{V}}$ description: Misc. Jewelry \$125.00 Line from 100% of fair market value, up to any Schedule A/B: 12 applicable statutory limit 735 ILCS 5/12-1001(b) Brief \$150.00  $\overline{\mathbf{V}}$ description: Misc. Electronics \$150.00 Line from 100% of fair market value, up to any Schedule A/B: 07 applicable statutory limit 735 ILCS 5/12-1001(b) Brief \$205.00 **V** description: Chase \$205.00 Line from 100% of fair market value, up to any Schedule A/B: 17 applicable statutory limit 735 ILCS 5/12-1001(b) Brief \$100.00 lacksquaredescription: Chase \$100.00 Line from 100% of fair market value, up to any Schedule A/B: 17 applicable statutory limit

100% of fair market value, up to any

applicable statutory limit

\$9,975.00

Brief

description:

Schedule A/B:

Line from

Hyundai, Santa Fe

03

735 ILCS 5/12-1001(c); 735 ILCS

5/12-1001(b)

|                    |  | Case 16-19838   | Doc 1 Filed   | 06/17/16 Entered   | 1.06/17/16.00:2  | 1:15 D           | occ Main                                       |                                   |
|--------------------|--|---|---|--|--|------------------|--|-----------------------------------|
| Fill               | in this informa                            | ation to identify your case:  |   |  | 1/10 09.2  | 4.45 D           | esc Main                                       |                                   |
| Del                | otor 1                                     | Lecrecia<br>First Name  | Middle Name   | Nesbit<br>Last Name  |  |                  |  |                                   |
|                    | otor 2<br>ouse, if filing)                 | First Name  | Middle Name   | Last Name  |  |                  |  |                                   |
| Uni                | ted States Ba                              | nkruptcy Court for the: <u>N</u>  | lorthern  | District of Illinois (State)   |  |                  |  |                                   |
|                    | se number<br>nown)                         |   |   |  |  |                  |  |                                   |
| Of                 | ficial F                                   | orm 106D  |   |  |  |                  |  | eck if this is a<br>ended filing  |
| Sc                 | chedul                                     | le D: Credito   | rs Who Hav  | ve Claims Sec  | cured by P   | roperty          | /  | 12/1                              |
| cori<br>forn<br>1. | Do any creed No. Ch                        | nation. If more space<br>top of any additional<br>ditors have claims secured<br>eck this box and submit this f<br>Il in all of the information belo | e is needed, copy to<br>pages, write your<br>driby your property?<br>form to the court with you | rried people are filing the Additional Page, find name and case numb ar other schedules. You have no | I it out, number the critical state of the c | ne entries,      |  |                                   |
|                    | •  | II Secured Claims   |   | aladaa Patrika aasa Ptanasa aasa   | ol Consoli Od an A   | 0                |  | 0.1 0                             |
| 2.                 | claim. If mor                              |   | rticular claim, list the other  | claim, list the creditor separater creditors in Part 2. As much ditor's name.                        | •  | claim Valuet the | olumn B lue of collateral at supports this lim | Column C Unsecured portion If any |
| 2.1                | Carmax Auto<br>Creditor's Na<br>2040 Thalb | me  | Describe the propert  | y that secures the claim:  | \$17,602   | 00               | \$9,975.00                                     | \$7,627.00                        |
|                    | Number                                     | Street  | O60 Automobile  As of the date you file   | e, the claim is: Check all that  | apply.   |                  |  |                                   |
|                    | Richmond<br>City                           | Virginia 23230<br>State ZIP Code  | Contingent Unliquidated   |  |  |                  |  |                                   |
|                    | wno owes ✓ Debtor                          | the debt? Check one. 1 only   | Disputed  Nature of lien. Check   | all that apply   |  |                  |  |                                   |
|                    | Debtor 2                                   | 2 only<br>1 and Debtor 2 only   | _   | u made (such as mortgage or  | secured  |                  |  |                                   |
|                    | At least another                           | one of the debtors and  | Statutory lien (suc   | ch as tax lien, mechanic's lien)   |  |                  |  |                                   |
|                    | commu                                      | if this claim relates to a<br>unity debt  | Judgment lien from Other (including a   |  |  |                  |  |                                   |
|                    | Date debt w                                | as incurred 1/1/2016  | Last 4 digits of acco   | unt number3010   |  |                  |  |                                   |
|                    | ,  | Add the dollar value of you   |   |  | <b>mber</b> \$17,602   |                  |  |                                   |

|                            |   | Case 16-19838                                   | Doc 1 File   | d 06/17/16  | Entered 0   | <u>16/1</u> 7/16 09:24:4   | 5 Desc                               | Main                        |                                |
|----------------------------|---|---|--|---|---|--|--------------------------------------|-----------------------------|--------------------------------|
| Fill in                    | this informa  | ation to identify your case:                    |  |   |   | 1710 00.24.4   | 0 2000                               | Wiairi                      |                                |
| Debt                       | or 1  | Lecrecia<br>First Name                          | Middle Name  | Nesbit<br>Last Na   | ama   | _ ]  |                                      |                             |                                |
| Debt                       |   | First Name                                      | Middle Name  | Last Na   |   | _  |                                      |                             |                                |
|                            |   | nkruptcy Court for the:                         | Northern   | District of Illii   | nois  | _  |                                      |                             |                                |
| Case<br>(If knd            | number  |   |  | (S  | tate)   | _  |                                      |                             |                                |
|                            |   | orm 106E/F                                      |  |   |   |  | Chec                                 | k if this is ar             | n amended filing               |
| Sc                         | hedu  | le E/F: Cred                                    | ditors Who   | Have U  | nsecure   | ed Claims  |                                      |                             | 12/15                          |
| 106Å/<br>are lis<br>the bo | B) and on Sited in Schools  | Schedule G: Executory<br>edule D: Creditors Who | Contracts and Unexpi<br>Hold Claims Secured<br>uation Page to this pag   | red Leases (Officia<br>by Property. If moge. On the top of a  | I Form 106G). De re space is nee  | tory contracts on <i>Sched</i> Oo not include any credit ded, copy the Part you nages, write your name a | tors with parti<br>need, fill it out | ally secured<br>, number th | d claims that<br>ne entries in |
| 2.                         | No. Go<br>Yes.<br>List all of y<br>identify wha<br>possible, lis<br>Part 1. If mo                               | it type of claim it is. If a clai               | claims. If a creditor has<br>im has both priority and r<br>al order according to the<br>s a particular claim, list t | more than one prior<br>nonpriority amounts,<br>creditor's name. If yo<br>he other creditors in              | list that claim he<br>ou have more tha<br>Part 3.   | aim, list the creditor separa<br>re and show both priority a<br>an two priority unsecured c              | nd nonpriority a                     | amounts. As                 | much as                        |
|                            |   |   |  |   |   |  | Total claim                          | Priority amount             | Nonpriority amount             |
|                            | Check Sthe claim  No  PO Box 643: Number  Chicago  City  Who incuri  Debtor  Debtor  At least  Check Sthe claim | Illinois State red the debt? Check one 1 only   | 60664<br>Zip Code  | Contingent Unliquidated Disputed Type of PRIORITY Domestic supp Taxes and certa Claims for deat intoxicated | bt incurred?  I file, the claim in the claim other debts youth or personal injuries. | n/a<br>is: Check all that apply.   | \$536.12                             | \$536.12                    | \$0.00                         |
|                            | Yes   |   |  |   |   |  |                                      |                             |                                |

Doc 1 Filed 06/437/16 Entered 06/417/116/09:24:45 Desc Main Lecreci Case 16-19838 Debtor 1 Document Page 24 of 70 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 AFNI, INC \$248.00 Last 4 digits of account number 2842 Nonpriority Creditor's Name PO BOX 3427 When was the debt incurred? 3/1/2016 Street Number As of the date you file, the claim is: Check all that apply. Contingent **BLOOMINGTON** Illinois 61702 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt 001 Collection; Collecting for ORIGINAL ✓ Is the claim subject to offset? Other. Specify CREDITOR: AT T **✓** No Yes 4.2 CHASE AUTO \$5,972.00 Last 4 digits of account number 2305 Nonpriority Creditor's Name P.O. BOX 901003 CREDIT BUREAU DISP When was the debt incurred? 10/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent FORT WORTH 76101 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only ✓ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify 048 Automobile **✓** No Yes 4.3 CONVERGENT OUTSOURCING \$808.00 Last 4 digits of account number 5583 Nonpriority Creditor's Name 800 SW 39th St When was the debt incurred? 7/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent Renton Washington 98057 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans

✓ No ☐ Yes

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

At least one of the debtors and another

Check if this claim relates to a community debt

Other. Specify

Obligations arising out of a separation agreement or divorce that

Debts to pension or profit-sharing plans, and other similar debts

001 Collection; Collecting for ORIGINAL

CREDITOR: COMCAST

you did not report as priority claims

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First Name Document Page 25 of 70

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page 

|       | At the state of th |  |               |  |  |  |  |
|-------|--|--|---------------|--|--|--|--|
|       | After listing any entries on this page, number them beginning  | with 4.5, followed by 4.6, and so forth.   | Total claim   |  |  |  |  |
| 4.4   | CREDIT PROTECTION ASSO   | Last 4 digits of account number 4276   | \$724.00      |  |  |  |  |
|       | Nonpriority Creditor's Name  |  |               |  |  |  |  |
|       | PO Box 802068<br>Number Street   | When was the debt incurred? 1/1/2016   |               |  |  |  |  |
|       |  | As of the date you file, the claim is: Check all that apply.   |               |  |  |  |  |
|       |  | Contingent   |               |  |  |  |  |
|       | Dallas Texas 75380   | Unliquidated   |               |  |  |  |  |
|       | City State Zip Code Who incurred the debt? Check one.  |  |               |  |  |  |  |
|       | Debtor 1 only  | Disputed   |               |  |  |  |  |
|       | Debtor 2 only  | Type of NONPRIORITY unsecured claim:   |               |  |  |  |  |
|       | <b>≝</b> ′   | Student loans  |               |  |  |  |  |
|       | Debtor 1 and Debtor 2 only   | Obligations arising out of a separation agreement or divorce that  |               |  |  |  |  |
|       | At least one of the debtors and another  | you did not report as priority claims  |               |  |  |  |  |
|       | Check if this claim relates to a community debt  | Debts to pension or profit-sharing plans, and other similar debts  |               |  |  |  |  |
|       | Is the claim subject to offset?  | ✓ 001 Collection; Collecting for ORIGINAL  |               |  |  |  |  |
|       | ✓ No   | CREDITOR: PEOPLES GAS LIGHT  |               |  |  |  |  |
|       | Yes  | Other. SpecifyCOKE CO  |               |  |  |  |  |
| 4 = 1 | —  |  | <b>MO.11.</b> |  |  |  |  |
| 4.5   | GINNY'S INC Nonpriority Creditor's Name  | Last 4 digits of account number1834  | \$344.00      |  |  |  |  |
|       | 1112 7TH AVE POB 2816  | When was the debt incurred? 10/1/2006  |               |  |  |  |  |
|       | Number Street  | As of the date way file the plains in Oheal, all that and  |               |  |  |  |  |
|       |  | As of the date you file, the claim is: Check all that apply.   |               |  |  |  |  |
|       | MONROE Wisconsin 53566   | Contingent   |               |  |  |  |  |
|       | City State Zip Code  | Unliquidated   |               |  |  |  |  |
|       | Who incurred the debt? Check one.  | Disputed   |               |  |  |  |  |
|       | Debtor 1 only  | Type of NONPRIORITY unsecured claim:   |               |  |  |  |  |
|       | Debtor 2 only  | Student loans  |               |  |  |  |  |
|       | Debtor 1 and Debtor 2 only   |  |               |  |  |  |  |
|       | At least one of the debtors and another  | Obligations arising out of a separation agreement or divorce that<br>you did not report as priority claims |               |  |  |  |  |
|       | Check if this claim relates to a community debt  | Debts to pension or profit-sharing plans, and other similar debts  |               |  |  |  |  |
|       | Is the claim subject to offset?  | ✓ Other. Specify CreditCard  |               |  |  |  |  |
|       | No   | Greateard Greateard  |               |  |  |  |  |
|       | <b>=</b> .   |  |               |  |  |  |  |
|       | Yes  |  |               |  |  |  |  |
| 4.6   | I C SYSTEM INC   | Last 4 digits of account number 2001   | \$524.00      |  |  |  |  |
|       | Nonpriority Creditor's Name  | When was the debt incurred? 12/1/2015  |               |  |  |  |  |
|       | Number Street  | When was the dest incurred: 12 1/2015  |               |  |  |  |  |
|       |  | As of the date you file, the claim is: Check all that apply.   |               |  |  |  |  |
|       |  | Contingent   |               |  |  |  |  |
|       |  | Unliquidated   |               |  |  |  |  |
|       | City State Zip Code  | Disputed   |               |  |  |  |  |
|       | Who incurred the debt? Check one.  | Type of NONPRIORITY unsecured claim:   |               |  |  |  |  |
|       | Debtor 1 only  | <u></u>  |               |  |  |  |  |
|       | Debtor 2 only  | ☐ Student loans  |               |  |  |  |  |
|       | Debtor 1 and Debtor 2 only   | Obligations arising out of a separation agreement or divorce that<br>you did not report as priority claims |               |  |  |  |  |
|       | At least one of the debtors and another  | Debts to pension or profit-sharing plans, and other similar debts  |               |  |  |  |  |
|       | Check if this claim relates to a community debt  |  |               |  |  |  |  |
|       | Is the claim subject to offset?  | 001 Collection; Collecting for ORIGINAL Other. Specify CREDITOR: AT T UVERSE                               |               |  |  |  |  |
|       | No   |  |               |  |  |  |  |
|       | Vac  |  |               |  |  |  |  |

Filed 06/43/16 Entered 06/47/16 /09/24:45 Desc Main Document Page 26 of 70 hims - Continuation Page 

| ı aıı | 2. Tour NONF MONTH For onsecured Claims - Continu               | auton i age  |             |
|-------|---|--|-------------|
|       | After listing any entries on this page, number them beginning w | vith 4.5, followed by 4.6, and so forth.   | Total claim |
| 4.7   | JEFFERSON CAPITAL SYST  | Last 4 digits of account number 2003   | \$1,017.00  |
|       | Nonpriority Creditor's Name<br>16 MCLELAND RD                   | When was the debt incurred? 7/1/2015   |             |
|       | Number Street   | As of the date you file, the claim is: Check all that apply.   |             |
|       |   | Contingent   |             |
|       | SAINT CLOUD Minnesota 56303                                     | <u> </u>   |             |
|       | City State Zip Code  Who incurred the debt? Check one.          | Unliquidated   |             |
|       | Debtor 1 only   | Disputed   |             |
|       | Debtor 2 only   | Type of NONPRIORITY unsecured claim:   |             |
|       | Debtor 1 and Debtor 2 only                                      | Student loans  |             |
|       | At least one of the debtors and another                         | Obligations arising out of a separation agreement or divorce that<br>you did not report as priority claims |             |
|       | Check if this claim relates to a community debt                 | Debts to pension or profit-sharing plans, and other similar debts  |             |
|       | Is the claim subject to offset?                                 | ✓ Other. Specify 001 UnknownLoanType   |             |
|       | ▼ No  |  |             |
|       | Yes   |  |             |
| 4.8   | MIDLAND FUNDING   | Local A Portion of an account mountains 20070  | \$2,657.00  |
|       | Nonpriority Creditor's Name                                     | — Last 4 digits of account number 6276   | ΨΞ,007.100  |
|       | 8875 AERO DR STE 200<br>Number Street                           | When was the debt incurred? 12/1/2015  |             |
|       |   | As of the date you file, the claim is: Check all that apply.   |             |
|       | SAN DIEGO California 92123                                      | Contingent   |             |
|       | City State Zip Code   | Unliquidated   |             |
|       | Who incurred the debt? Check one.  Debtor 1 only                | Disputed   |             |
|       |   | Type of NONPRIORITY unsecured claim:   |             |
|       | Debtor 2 only   | Student loans  |             |
|       | Debtor 1 and Debtor 2 only                                      | Obligations arising out of a separation agreement or divorce that  |             |
|       | At least one of the debtors and another                         | you did not report as priority claims  |             |
|       | Check if this claim relates to a community debt                 | Debts to pension or profit-sharing plans, and other similar debts  |             |
|       | Is the claim subject to offset?                                 | ✓ Other. Specify   |             |
|       | ✓ No  |  |             |
| 1     | Yes   |  |             |
| 4.9   | MIDLAND FUNDING Nonpriority Creditor's Name                     | Last 4 digits of account number2676  | \$1,271.00  |
|       | 8875 AERO DR STE 200  | When was the debt incurred? 12/1/2015  |             |
|       | Number Street   | As of the date you file, the claim is: Check all that apply.   |             |
|       |   | Contingent   |             |
|       | SAN DIEGO California 92123 City State Zip Code                  | Unliquidated   |             |
|       | Who incurred the debt? Check one.                               | Disputed   |             |
|       | Debtor 1 only   | Type of NONPRIORITY unsecured claim:   |             |
|       | Debtor 2 only   | Student loans  |             |
|       | Debtor 1 and Debtor 2 only                                      | Obligations arising out of a separation agreement or divorce that  |             |
|       | At least one of the debtors and another                         | you did not report as priority claims  |             |
|       | Check if this claim relates to a community debt                 | Debts to pension or profit-sharing plans, and other similar debts  |             |
|       | Is the claim subject to offset?                                 | ✓ Other. Specify 001 UnknownLoanType   |             |
|       | ✓ No  |  |             |
|       | Yes   |  |             |

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rst Name Middle Name Documet Name Page 27 of 70

Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim 4.10 PORTFOLIO RECOVERY ASS \$5,690.00 Last 4 digits of account number Nonpriority Creditor's Name 120 CORPORATE BLVD STE 1 When was the debt incurred? 2/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **NORFOLK** Virginia Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only  $\overline{\mathbf{A}}$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts 001 UnknownLoanType Is the claim subject to offset? Other. Specify **✓** No Yes 4.11 PORTFOLIO RECOVERY ASS \$927.00 Last 4 digits of account number Nonpriority Creditor's Name 120 CORPORATE BLVD STE 1 When was the debt incurred? 12/1/2015 Street Number As of the date you file, the claim is: Check all that apply. Contingent **NORFOLK** 23502 Virginia Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify 001 UnknownLoanType **I**✓ No Yes 4.12 PORTFOLIO RECOVERY ASS \$696.00 Last 4 digits of account number Nonpriority Creditor's Name 120 CORPORATE BLVD STE When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent **NORFOLK** Virginia 23502 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only **|** | Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify 001 UnknownLoanType **✓** No

Yes

Lecreci Case 16-19838 Doc 1 Debtor 1

Document Page 28 of 70 Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 SEVENTH AVE \$891.00 Last 4 digits of account number Nonpriority Creditor's Name 1112 7th Ave When was the debt incurred? 2/1/2007 Street Number As of the date you file, the claim is: Check all that apply. Contingent Wisconsin 53566 Monroe Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only  $\square$ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify CreditCard Is the claim subject to offset? **✓** No Yes 4.14 SYNCB/AMAZON \$1.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 965015 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent ORLANDO Florida 32896 City Unliquidated State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only 4.15

| Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt ls the claim subject to offset?  No Yes                   | Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  ✓ Other. Specify Credit Card Debt  |
|--|---|
| SYNCB/SAMS CLUB Nonpriority Creditor's Name 4125 WINDWARD PLAZA Number Street  ALPHARETTA Georgia 30005 City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only | Last 4 digits of account number  When was the debt incurred? n/a  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:  |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Is the claim subject to offset?  No  Yes                             | <ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>Debts to pension or profit-sharing plans, and other similar debts</li> <li>✓ Other. Specify Credit Card</li> </ul> |

Debtor 1
LecreciCase 16-19838 Doc 1 Filed 06/43/16 Entered 06/47/16/09:24:45 Desc Main
First Name Middle Name Document Page 29 of 70

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.  |   |            |  |  |  |  |
|---|---|------------|--|--|--|--|
| 4.16 TORRES CRDIT Nonpriority Creditor's Name 27 fairview st suite 301 Number Street  | Last 4 digits of account number 6823  When was the debt incurred? 9/1/2015  As of the date you file, the claim is: Check all that apply.  | \$399.00   |  |  |  |  |
| CARLISLE Pennsylvania 17013 City State Zip Code Who incurred the debt? Check one.  ✓ Debtor 1 only  ☐ Debtor 2 only  ☐ Debtor 1 and Debtor 2 only  ☐ At least one of the debtors and another  ☐ Check if this claim relates to a community debt  Is the claim subject to offset?  ✓ No  ☐ Yes | Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts O01 Collection; Collecting for ORIGINAL CREDITOR: 10 COMMONWEALTH Other. Specify EDISON CO |            |  |  |  |  |
| ### WEBBANK/GTN Nonpriority Creditor's Name 6250 RIDGEWOOD ROA Number Street    SAINT CLOUD   | Last 4 digits of account number  When was the debt incurred?  | \$1,000.00 |  |  |  |  |

Debtor 1 Lecreci Case 16-19838 Doc 1 Filed 06/433/416 Entered 06/417/416/09/24:45 Desc Main Page 30 of 70

Part 4: Add the Amounts for Each Type of Unsecured Claim

|                          |     | nts of certain types of unsecured claims. This information is fo<br>ts for each type of unsecured claim. | r sta | atistical reporting purposes only. 28 | U.S.C. §159. |
|--------------------------|-----|--|-------|---------------------------------------|--------------|
|                          |     |  |       | Total claims                          |              |
| Total claims from Part 1 | 6a. | Domestic support obligations.  | 6a.   | \$0.00                                |              |
| IIOIII Fait I            | 6b  | Taxes and certain other debts you owe the government   | 6b.   | \$536.12                              |              |
|                          | 6c. | Claims for death or personal injury while you were intoxicated   | 6c.   | \$0.00                                |              |
|                          | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                  | 6d.   | \$0.00                                |              |
|                          | 6e. | Total. Add lines 6a through 6d.  | 6e.   | \$536.12                              |              |
|                          |     |  |       | Total claims                          |              |
| Total claims from Part 2 | 6f. | Student loans  | 6f.   | \$0.00                                |              |
|                          | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  | 6g.   | \$0.00                                |              |
|                          | 6h  | Debts to pension or profit-sharing plans, and other similar debts  | 6h.   | \$0.00                                |              |
|                          | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here.                               | 6i.   | \$24,069.00                           |              |
|                          | 6j. | Total. Add lines 6f through 6i.  | 6j.   | \$24,069.00                           |              |

| Fill in        | n this inform      | Case 16-1983 ation to identify your case |  | 06/17/16               | Entered 06/                | 17/16 09:24:45                 | Desc Main  |
|----------------|--------------------|--|--|------------------------|----------------------------|--------------------------------|--|
| Debt           | tor 1              | Lecrecia                                 |  | Nesbit                 | J                          |                                |  |
|                |                    | First Name                               | Middle Name  | Last Nar               | me                         |                                |  |
| Debt           |                    |  |  |                        |                            |                                |  |
| (Spo           | use, if filing)    | First Name                               | Middle Name  | Last Nar               | me                         |                                |  |
| Unite          | ed States Ba       | ankruptcy Court for the:                 | Northern   | District of Illino     | -                          |                                |  |
| Case<br>(If kn | e number           |  |  |                        |                            |                                |  |
| `              |                    | Form 106G                                |  |                        |                            |                                | Check if this is an amended filing                               |
| Sc             | hedul              | e G: Execut                              | ory Contracts  | s and Une              | expired Le                 | eases                          | 12/1   |
| space          |                    | l, copy the additional p                 |  |                        |                            |                                | ing correct information. If more onal pages, write your name and |
| 1. D           |                    | •  | contracts or unexpirm with the court with your c           |                        | ı have nothing else t      | to report on this form.        |  |
| Ī,             | –<br>✓ Yes. Fill i | in all of the information be             | elow even if the contracts or                              | r leases are listed or | n <i>Schedule A/B: Pro</i> | operty (Official Form 106A     | /B).   |
|                |                    |  | npany with whom you han<br>nstructions for this form in th |                        |                            |                                | ase is for (for example, rent, d unexpired leases.               |
|                | Person             | or company with whor                     | n you have the contract o                                  | or lease               |                            | State what the contract        | t or lease is for  |
| 2.1            | Sherman            | Cole                                     |  |                        |                            | Residential Lease,             |  |
|                | Name               |  |  |                        |                            | Other,<br>Month to Month Lease |  |
|                | Number             | Street                                   |  |                        |                            |                                |  |
|                | City               | St                                       | ate Zip (  | Code                   |                            |                                |  |

|       |                             | Case 16-1983   | P Doc 1 Filad (   | 06/17/16 Entered                      | 06/17/16 09:24:45              | Desc Main  |
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| Fill  | in this inforn              | nation to identify your cas  |   | 16/17/16 Filleren                     | 00/1,7/10 09.24.45             | Desc Main  |
| De    | btor 1                      | Lecrecia   |   | Nesbit                                |                                |  |
| _     |                             | First Name   | Middle Name   | Last Name                             |                                |  |
|       | btor 2<br>oouse, if filing  | First Name   | Middle Name   | Last Name                             | —                              |  |
| Un    | ited States B               | sankruptcy Court for the:  | Northern  | District of Illinois                  |                                |  |
|       | se number<br>(nown)         |  |   | (State)                               | _                              |  |
|       |                             |  |   |                                       |                                | Check if this is a amended filing  |
| Of    | fficial I                   | Form 106H  |   |                                       |                                | amended illing   |
|       |                             | e H: Your Co   | odebtors  |                                       |                                | 12/1:  |
| in th | ne boxes on<br>ry question. | the left. Attach the Add   | ditional Page to this page. C                                 |                                       | Pages, write your name and c   | e, fill it out, and number the entries<br>ase number (if known). Answer                |
| 2.    | Louisiana, I  No. G  Yes. [ | Nevada, New Mexico, Pu<br>so to line 3.<br>Did your spouse, former s<br>No | erto Rico, Texas, Washington, pouse, or legal equivalent live | and Wisconsin.) with you at the time? |                                | <i>ie</i> s include Arizona, California, Idaho,  |
|       |                             | Yes. In which community:   | state or territory did you live? _                            | Fill in the                           | name and current address of th | at person.   |
|       |                             | Name of your spouse, f   | former spouse, or legal equival                               | ent                                   | _                              |  |
|       |                             | Number Street  |   |                                       | _                              |  |
|       |                             | City   | State   | Zip Code                              | _                              |  |
| 3.    | as a codek                  | otor only if that person   | is a guarantor or cosigner.                                   | Make sure you have listed th          |                                | the person shown in line 2 again<br>ficial Form 106D), <i>Schedule E/F</i><br>olumn 2. |
|       | Column 1:                   | : Your codebtor  |   |                                       | Column 2: The creditor to      | whom you owe the debt  |

Check all schedules that apply:

| Fill in th                        | is information to identify                               | y your case:  | 14-14-0                                |                    | 7/16 09           | :24:45 D                      | esc Main           |                        |
|-----------------------------------|--|---|--|--------------------|-------------------|-------------------------------|--------------------|------------------------|
| Debtor 1                          | Lecrecia   | Docum   | Nesbit                                 | age 33 or          |                   |                               |                    |                        |
| DCDIOI 1                          | First Name   | Middle Name   | Last Name                              | <u></u> е          |                   | Oh a alvif this is            |                    |                        |
| Debtor 2                          | (filipp)   |   |  |                    |                   | Check if this is:  An amended | d filing           |                        |
| (Spouse, II                       | First Name   | Middle Name   | Last Name                              | е                  |                   |                               | Ü                  | st-petition chapter 13 |
| United Sta                        | tes Bankruptcy Court for the:                            | Northern  | District of Illinoi                    |                    |                   |                               | s of the following |                        |
| Case num<br>(If known)            | ber  |   | (State                                 | <del></del>        |                   | MM / DD / Y                   |                    |                        |
| Officia                           | al Form 1061   |   |  |                    |                   |                               |                    |                        |
| Sche                              | dule I: Your Inc   | ome   |  |                    |                   |                               |                    | 12/15                  |
| nformat<br>ages, w                | ion about your spouse                                    | r spouse. If you are sep<br>e. If more space is neede<br>se number (if known). An   | ed, attach a                           | separate sh        |                   |                               |                    |                        |
| 1.                                | Fill in your employment                                  |   | Debtor 1                               |                    |                   | Debtor 2                      |                    |                        |
|                                   | information.   | Employment status   |  |                    |                   |                               |                    |                        |
|                                   | If you have more than one job,                           | Employment status   | ✓ Employed  Not Employ                 | yed                |                   | Employed  Not Employ          | yed                |                        |
|                                   | attach a separate page with information about additional | Occupation  |  |                    |                   |                               |                    |                        |
|                                   | employers.   | Employer's name   | FTI Consulting                         | g, Inc.            |                   |                               |                    |                        |
|                                   | Include part time, seasonal,                             | Employer's address  | 909 Commerce                           | e Road             |                   |                               |                    |                        |
|                                   | or<br>self-employed work.                                |   | Number Street                          |                    |                   | Number Street                 |                    |                        |
|                                   | Occupation may include                                   |   |  |                    |                   |                               |                    |                        |
|                                   | student or homemaker, if it applies.                     |   |  |                    |                   |                               |                    |                        |
|                                   | or nomemaker, it it applies.                             |   | Annapolis<br>City                      | Maryland<br>State  | Zip Code          | City                          | State              | Zip Code               |
|                                   |  | How long employed there?  | —————————————————————————————————————— |                    | Zip code          |                               |                    |                        |
| Estimate are separate of you or y | rated.   | Monthly Income  date you file this form. If you have than one employer, combine the |  | r all employers fo | or that person or |                               | If you need mo     | -                      |
|                                   |  |   |  | For D              | ebtor 1           | non-filing sp                 |                    |                        |
| ded                               | uctions.) If not paid monthly, cal                       | y, and commissions (before all lculate what the monthly wage wo                     |  | 2.                 | \$5,569.01        |                               |                    |                        |
| <ol><li>Esti</li></ol>            | mate and list monthly overt                              | ime pav.  |  | 3.                 | + \$0.00          |                               |                    |                        |

4. Calculate gross income. Add line 2 + line 3.

\$5,569.01

Debtor 1 Lecrecia Case 16-19838 Doc 1 Filed 06/457/16 Entered 06/17/166 09:24:45 Desc Main Documentame Page 34 of 70 Middle Name For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4 \$5,569.01 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$1,461.29 5b. 5b. Mandatory contributions for retirement plans \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$533.28 5f. Domestic support obligations 5f. \$0.00 5q. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. + \$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$1,994.57 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$3,574.44 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 monthly net income. 8a. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies 8f. \$0.00 \$0.00 8g. Pension or retirement income 8g. 8h. Other monthly income. Specify: 8h. -\$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$0.00 10.Calculate monthly income. Add line 7 + line 9. 10. \$3,574.44 \$3,574.44 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. + \$0.00 Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. \$3,574.44 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain:

| Fill in Alein info  | Case 16-1983                  |   | 06/17/16 Entered 06/   | 7/16 09:24:45      | Desc Ma                       | in              |
|---|-------------------------------|---|--|--------------------|-------------------------------|-----------------|
| FIII IN THIS INTO   | ormation to identify your cas | se:   | J  |                    |                               |                 |
| Debtor 1  | Lecrecia                      | NA' L.H. N  | Nesbit   |                    |                               |                 |
| Dobtor 2  | First Name                    | Middle Name   | Last Name  | Check if this is:  |                               |                 |
| Debtor 2<br>(Spouse, if fill  | ing) First Name               | Middle Name   | Last Name  | An amended filing  |                               |                 |
|   |                               | Northorn  | District of Illinois   | A supplement sho   |                               | tion chanter 13 |
| Officed States  | s Bankruptcy Court for the:   | Northern  | (State)  | expenses as of the | •                             | ·               |
| Case number   | r                             |   | <u> </u>   |                    |                               |                 |
| (II KIIOWII)  |                               |   |  | MM / DD / YYYY     |                               |                 |
| Official  | Form 106J                     |   |  |                    |                               |                 |
|   | ıle J: Your Ex                | oenses  |  |                    |                               | 12/1            |
|   |                               | •   |  |                    |                               |                 |
| nformation. I   | -                             |   | e filing together, both are equally<br>form. On the top of any additiona |                    | -                             | mber            |
|   | scribe Your Househ            | old   |  |                    |                               |                 |
| 1. Is this a jo   |                               | ···   |  |                    |                               |                 |
|   | Go to line 2                  |   |  |                    |                               |                 |
|   | Does Debtor 2 live in a se    | anarata hausahald?                                    |  |                    |                               |                 |
| L Tes.  | _                             | eparate nousenoid?                                    |  |                    |                               |                 |
|   | ∐ No                          |   |  |                    |                               |                 |
|   | Yes. Debtor 2 must file       | e Official Forms 106J-2, Expen                        | ses for Separate Household of Debto                                      | or 2.              |                               |                 |
| 2. <b>Do you h</b> a  | ave dependents?               | lo  |  |                    |                               |                 |
| Do not list<br>Debtor 2.  |                               | es. Fill out this information for ach dependent       | Dependent's relationship to<br>Debtor 1 or Debtor 2                      | Dependent's age    | Does dependent live with you? |                 |
| •   | expenses include              | lo  |  |                    |                               |                 |
| expenses<br>than  | or people outler              |   |  |                    |                               |                 |
| yourself a  | ind your 🗀                    | 'es   |  |                    |                               |                 |
| depender  | nts?                          |   |  |                    |                               |                 |
| Part 2: Est   | timate Your Ongoing           | Monthly Expenses                                      |  |                    |                               |                 |
| •   | s of a date after the bank    |   | you are using this form as a supp<br>oplemental Schedule J, check the    | •                  |                               | ne              |
|   |                               | ash government assistance t on Schedule I: Your Incom |  |                    |                               | Your expenses   |
| 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. |                               |   |  |                    | 4.                            | \$700.00        |
| If not in   | cluded in line 4:             |   |  |                    |                               |                 |
| 4a. Real  | estate taxes                  |   |  |                    | 4a                            | \$0.00          |
| 4b. Prop  | erty, homeowner's, or rente   | r's insurance   |  |                    | 4b.                           | \$0.00          |
| 4c. Home maintenance, repair, and upkeep expenses   |                               |   |  |                    | 4c.                           | \$0.00          |

\$0.00

4d.

4d. Homeowner's association or condominium dues

Debtor 1 Lecreci Case 16-19838 Doc 1 Filed 06/457/16 Entered 06/457/16 09:24:45 Desc Main

Document Page 36 of 70 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$350.00 6a. 6b. Water, sewer, garbage collection \$50.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$296.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$350.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning \$150.00 9. 10. Personal care products and services \$150.00 10. 11. Medical and dental expenses \$100.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$300.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$150.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$453.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

| Debtor 1          | LecreciCase 16-19838 First Name  | Doc 1                    | Filed 06/4s/16           | Entered 06/17/116/09/24:45 | Desc Main |              |
|-------------------|--|--------------------------|--------------------------|----------------------------|-----------|--------------|
| 04 041            |  | Wildule Name             | Document Programme       | Page 37 of 70              |           | <b>#0.00</b> |
| 21.Other          | Specify:   |                          |                          |                            | 21        | \$0.00       |
| 00. <b>C</b> alau | lata   |                          |                          |                            |           |              |
|                   | late your monthly expenses.  |                          |                          |                            | _         | \$3,049.00   |
|                   | dd lines 4 through 21.   | <b>5</b> 1 . <b>6</b> 14 |                          | _                          | _         | \$0.00       |
|                   | opy line 22 (monthly expenses for  | ,.                       | •                        | -2                         | _         | \$3,049.00   |
| 22c. A            | dd line 22a and 22b. The result is y                                     | your monthly ex          | rpenses.                 |                            | 22.       |              |
| 23.Calcu          | ate your monthly net income.   |                          |                          |                            |           |              |
| 23a. C            | opy line 12 (your combined month   | nly income) fron         | n Schedule I.            |                            | 23a       | \$3,574.44   |
| 23b. C            | opy your monthly expenses from li  | ne 22 above.             |                          |                            | 23b       | \$3,049.00   |
|                   | ubtract your monthly expenses from                                       |                          | income.                  |                            |           | \$525.44     |
| •                 | The result is your monthly net inco                                      | me.                      |                          |                            | 23c       |              |
| 24. <b>Do yo</b>  | u expect an increase or decrea   | se in your exp           | enses within the year af | ter you file this form?    |           |              |
| •                 | •  |                          | •                        | ·                          |           |              |
|                   | xample, do you expect to finish par<br>page payment to increase or decre | , , ,                    | ,                        |                            |           |              |
| `                 | lo   |                          |                          |                            |           |              |
| _                 |  |                          |                          |                            |           |              |
| Π,                | es   |                          |                          |                            |           | 1            |
|                   | Explain here:  |                          |                          |                            |           |              |
|                   | ·  |                          |                          |                            |           |              |
|                   |  |                          |                          |                            |           |              |
|                   |  |                          |                          |                            |           |              |
|                   |  |                          |                          |                            |           |              |
|                   |  |                          |                          |                            |           |              |
|                   |  |                          |                          |                            |           |              |

|                |                            | Case 16-1983                | 8 Doc 1 Filed (             | 06/17/16         | Entored 06/                                  | <u>/1</u> 7/16 09:24:45             | Doce Main   |
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| Fill ir        | n this inform              | ation to identify your case |                             | 70717710         |  | 17/10 09.24.43                      | Desc Main   |
| Debt           | tor 1                      | Lecrecia                    |                             | Nesbit           |  |                                     |   |
| Debt           |                            | First Name                  | Middle Name                 | Last Na          |  |                                     |   |
| (Spo           | use, it tiling             | First Name                  | Middle Name                 | Last Na          | ame  |                                     |   |
| Unite          | ed States Ba               | ankruptcy Court for the:    | Northern                    | District of Illi |  |                                     |   |
| Case           | e number                   |                             |                             | (5               | tate)  |                                     |   |
| (If kn         | own)                       |                             |                             |                  |  |                                     | <b>—</b>  |
| Off            | icial F                    | Form 106De                  | <u>C</u>                    |                  |  |                                     | Check if this is an amended filing  |
| De             | clarat                     | ion About a                 | n Individual De             | ebtor's S        | Schedules                                    | <b>;</b>                            | 12/1  |
| lf two         | married p                  | eople are filing togethe    | r, both are equally respons | sible for supply | ing correct inform                           | ation.                              |   |
| prope<br>1519, |                            | d in connection with a      |                             |                  |  |                                     | ling property, or obtaining money or<br>ars, or both. 18 U.S.C. §§ 152, 1341, |
|                |                            | y or agree to pay some      | one who is NOT an attorne   | ey to help you f | ll out bankruptcy f                          | forms?                              |   |
|                | <b>✓</b> No                |                             |                             |                  |  |                                     |   |
|                | Yes. N                     | lame of person              |                             |                  | Bankruptcy Petition<br>ure (Official Form 11 | n Preparer's Notice, Declar<br>19). | ration, and   |
|                |                            |                             |                             |                  |  |                                     |   |
|                |                            | alty of perjury, I declare  | e that I have read the sumn | nary and sched   | ules filed with this                         | declaration and                     |   |
| ×              | /s/ Lecreci                | a Nesbit                    |                             |                  | ×  |                                     |   |
| ;              | Signature of               | f Debtor 1                  |                             |                  | Signature of De                              | ebtor 2                             |   |
|                | Date <u>6/17/2</u><br>MM/I | 2016<br>DD/YYYY             |                             |                  | Date   | YYYY                                |   |

| and accurate as possibl<br>, attach a separate shee   | Middle N  Middle N  Northern  Al Affairs  le. If two married to this form. On                                    | Last Nan  District of Illing (Sta  | ois<br>ate)  |   | Check if this is a amended filing   |
|---|--|--|--|---|---|
| First Name  nkruptcy Court for the:  orm 107  nt of Financia and accurate as possible, attach a separate shee | Middle N Northern  Al Affairs le. If two married to this form. On  | Last Nan  District of Illing (Sta  | ois<br>ate)  |   |   |
| nkruptcy Court for the:  Orm 107  nt of Financia and accurate as possible, attach a separate shee             | Northern  Al Affairs  e. If two married to this form. On   | District of Illing (Sta  | ois<br>ate)  |   |   |
| orm 107  nt of Financia and accurate as possible, attach a separate shee                                      | al Affairs le. If two married t to this form. On   | for Individua people are filing together   | ate)   |   |   |
| nt of Financia<br>and accurate as possible<br>attach a separate shee  | e. If two married<br>t to this form. On  | for Individua  |  |   |   |
| nt of Financia<br>and accurate as possible<br>attach a separate shee  | e. If two married<br>t to this form. On  | people are filing together   | ls Filing f  | 1<br>   |   |
| nt of Financia<br>and accurate as possible<br>attach a separate shee  | e. If two married<br>t to this form. On  | people are filing together   | ls Filing f  |   |   |
| and accurate as possibl<br>, attach a separate shee   | e. If two married<br>t to this form. On  | people are filing together   |  | or Bankrupt   | :CV 12/1  |
|   | Maritai Status   | and Where You Live   | pages, write your  |   | ving correct information. If more<br>er (if known). Answer every question   |
| our current marital stat  | us?  |  |  |   |   |
| ied<br>narried  |  |  |  |   |   |
| e last 3 years, have you  | lived anywhere o   | ther than where you live I   | now?   |   |   |
| List all of the places you liv  | red in the last 3 yea  | rs. Do not include where yo  | ou live now.   |   |   |
| or 1:   |  | Dates Debtor 1 lived there   | Debtor 2:  |   | Dates Debtor 2 lived there  |
|   |  |  | Same as De   | ebtor 1   | Same as Debtor 1  |
| per Street  |  | From   | Number Street  |   | From  |
|   |  | . To   |  |   | To  |
| State   | Zip Code   | -  | City   | State Zip C   | <del></del><br>code   |
|   |  |  | Same as De   | ebtor 1   | Same as Debtor 1  |
| per Street  |  | From   | Number Street  |   | From  |
|   |  | . To   |  |   | To  |
| State   | Zin Code   | -  | City   | State Zip C   | ode   |
|   | •  |  | •  | ·   |   |
|   | e last 3 years, have you ist all of the places you live or 1:  er Street  State  State  sst 8 years, did you eve | e last 3 years, have you lived anywhere of ist all of the places you lived in the last 3 years.  The street  State Zip Code  State Zip Code  ast 8 years, did you ever live with a spoul | e last 3 years, have you lived anywhere other than where you live  ist all of the places you lived in the last 3 years. Do not include where you  or 1:  Dates Debtor 1 lived there  From  To  State Zip Code  State Zip Code  ast 8 years, did you ever live with a spouse or legal equivalent in | ast 3 years, have you lived anywhere other than where you live now?  ist all of the places you lived in the last 3 years. Do not include where you live now.  Dates Debtor 1 lived there  Debtor 2:  From | e last 3 years, have you lived anywhere other than where you live now?  ist all of the places you lived in the last 3 years. Do not include where you live now.  Dates Debtor 1 lived there  Same as Debtor 1  From |

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Part 2: Explain the Sources of Your Income

| activities. If you are filing a joint case and you h  No  Yes. Fill in the details.   |  |  |  |   |
|---|--|--|--|---|
|   | Debtor 1   |  | Debtor 2   |   |
|   | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions)  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) |
| From January 1 of current year until the date you filed for bankruptcy:   | ✓ Wages, commissions, bonuses, tips  ☐ Operating a business  | \$29239.00   | Wages, commissions, bonuses, tips Operating a business   |   |
| For last calendar year: (January 1 to December 31,  | Wages, commissions, bonuses, tips Operating a business   | \$10000.00   | Wages, commissions, bonuses, tips Operating a business   |   |
| For the calendar year before that: (January 1 to December 31, 2014 )  | Wages, commissions, bonuses, tips  |  | Wages, commissions, bonuses, tips  |   |
| clude income regardless of whether that incorenefit payments; pensions; rental income; intend you have income that you received together  | me is taxable. Examples of other<br>rest; dividends; money collected<br>r, list it only once under Debtor 1.   | r income are alimony; child s<br>I from lawsuits; royalties; and   | d gambling and lottery winnings.   |   |
| id you receive any other income during the clude income regardless of whether that incomenefit payments; pensions; rental income; intend you have income that you received together st each source and the gross income from ea   | is year or the two previous came is taxable. Examples of other rest; dividends; money collected, list it only once under Debtor 1.   | r income are alimony; child s<br>I from lawsuits; royalties; and   | support; Social Security, unemplo<br>d gambling and lottery winnings.                                      |   |
| Did you receive any other income during the colude income regardless of whether that income enefit payments; pensions; rental income; intend you have income that you received together ist each source and the gross income from each  | is year or the two previous came is taxable. Examples of other rest; dividends; money collected, list it only once under Debtor 1.   | r income are alimony; child s<br>I from lawsuits; royalties; and   | support; Social Security, unemplo<br>d gambling and lottery winnings.                                      |   |
| pid you receive any other income during the include income regardless of whether that income enefit payments; pensions; rental income; inteind you have income that you received together ist each source and the gross income from each  | is year or the two previous came is taxable. Examples of other rest; dividends; money collected, r, list it only once under Debtor 1.  | r income are alimony; child s<br>I from lawsuits; royalties; and   | support; Social Security, unemplo<br>d gambling and lottery winnings.<br>in line 4.                        | If you are filing a joint ca                          |
| id you receive any other income during the include income regardless of whether that income enefit payments; pensions; rental income; intend you have income that you received together each source and the gross income from each  | is year or the two previous came is taxable. Examples of other rest; dividends; money collected, list it only once under Debtor 1.  ch source separately. Do not income  Debtor 1  Sources of income | r income are alimony; child start income are alimony; child start income lawsuits; royalties; and child income that you listed income that you listed income from each source (before deductions and | support; Social Security, unemplo d gambling and lottery winnings. in line 4.  Debtor 2  Sources of income | Gross income from each source (before deductions an   |
| id you receive any other income during the clude income regardless of whether that income enefit payments; pensions; rental income; intend you have income that you received together sist each source and the gross income from each of the year. Fill in the details.  From January 1 of current year until | is year or the two previous came is taxable. Examples of other rest; dividends; money collected, list it only once under Debtor 1.  ch source separately. Do not income  Debtor 1  Sources of income | r income are alimony; child start income are alimony; child start income lawsuits; royalties; and child income that you listed income that you listed income from each source (before deductions and | support; Social Security, unemplo d gambling and lottery winnings. in line 4.  Debtor 2  Sources of income | Gross income from each source (before deductions an   |

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| List  | Certain Pa     | yments Y       | ou Made Before          | You Filed for Ban          | kruptcy  |                             |                              |  |  |
|---|----------------|----------------|-------------------------|----------------------------|--|-----------------------------|------------------------------|--|--|
| either  | Debtor 1's o   | r Debtor 2's   | debts primarily con     | sumer debts?               |  |                             |                              |  |  |
|   |                |                | tor 2 has primarily o   | consumer debts. Cons       | umer debts are defined in 11   | U.S.C. § 101(8) as "incurre | d by an individual primarily |  |  |
| D   | uring the 90 d | days before yo | ou filed for bankruptcy | , did you pay any credito  | r a total of \$6,425* or more?   |                             |                              |  |  |
| Г   | No. Go to      | line 7.        |                         |                            |  |                             |                              |  |  |
| Ī   | tota           | l amount you   | paid that creditor. Do  | not include payments fo    | more in one or more payment<br>r domestic support obligation<br>attorney for this bankruptcy c | s, such as                  |                              |  |  |
| * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. |                |                |                         |                            |  |                             |                              |  |  |
| Yes. D  | ebtor 1 or D   | ebtor 2 or b   | oth have primarily o    | consumer debts.            |  |                             |                              |  |  |
| D   | uring the 90 o | days before yo | ou filed for bankruptcy | , did you pay any credito  | r a total of \$600 or more?  |                             |                              |  |  |
| ī   | No. Go to      | line 7.        |                         |                            |  |                             |                              |  |  |
| Ī   |                |                | reditor to whom you n   | aid a total of \$600 or mo | re and the total amount you p  | aid                         |                              |  |  |
| _   | that           | creditor. Do   | not include payments    | for domestic support ob    | ligations, such as child supp  |                             |                              |  |  |
|   | alim           | iony. Also, do | not include payments    | to an attorney for this ba | inkruptcy case.  |                             |                              |  |  |
|   |                |                |                         | Dates of payment           | Total amount paid  | Amount you still owe        | Was this payment for         |  |  |
| Credi   | tor's Name     |                |                         |                            |  |                             | Mortgage                     |  |  |
| Niconolo  | er Street      |                |                         |                            |  |                             | Car                          |  |  |
| Numb  | ei Sileei      |                |                         |                            |  |                             | Credit card  Loan repayment  |  |  |
|   |                |                |                         |                            |  |                             | Suppliers or                 |  |  |
| City  |                | State          | Zip Code                |                            |  |                             | vendors                      |  |  |
|   |                |                |                         |                            |  |                             | Other                        |  |  |
| Credi   | tor's Name     |                |                         |                            |  |                             | Mortgage                     |  |  |
| Numb  | er Street      |                |                         |                            |  |                             | Car Credit card              |  |  |
| INGITIC   | ei Stieet      |                |                         |                            |  |                             | Loan repayment               |  |  |
|   |                |                |                         |                            |  |                             | Suppliers or                 |  |  |
| City  |                | State          | Zip Code                | •                          |  |                             | vendors                      |  |  |
|   |                |                |                         |                            |  |                             | U Other                      |  |  |
| Credi   | tor's Name     |                |                         |                            |  |                             | Mortgage                     |  |  |
| Numb  | er Street      |                |                         |                            |  |                             | Car Credit card              |  |  |
| NUITIL  | o olieet       |                |                         |                            |  |                             | Loan repayment               |  |  |
|   |                |                |                         |                            |  |                             | Suppliers or                 |  |  |
| City  |                | State          | Zip Code                |                            |  |                             | vendors                      |  |  |
|   |                |                |                         |                            |  |                             | Other                        |  |  |

Lecreci Case 16-19838 Doc 1 Filed 06/143/16 Entered 06/11/116/09/24:45 Desc Main Debtor 1 Document Page 42 of 70 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

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Part 4: Identify Legal Actions, Repossessions, and Foreclosures

|     | such matters, includ                                    | filed for bankruptcy, wing personal injury cases |          |                     |                    |        |          | tody modifications, | and contract |
|-----|---|--|----------|---------------------|--------------------|--------|----------|---------------------|--------------|
| ✓ N | lo<br>es. Fill in the details.                          |  |          |                     |                    |        |          |                     |              |
|     |   |  | Nature o | of the case         | Court or age       | ncy    |          | Status of the ca    | se           |
|     | Case title  |  |          |                     |                    |        |          | Pending             |              |
|     |   |  |          |                     | Court Name         |        |          | On appeal           |              |
|     | Case number   |  |          |                     | Number Stree       | t      |          | Concluded           |              |
|     |   |  |          |                     | City               | State  | Zip Code | •                   |              |
|     | Case title  |  |          |                     |                    |        |          | Pending             |              |
|     |   |  |          |                     | Court Name         |        |          | · <b>=</b>          |              |
|     | Case number   |  |          |                     | Courtivanie        |        |          | On appeal           |              |
|     |   |  |          |                     | Number Stree       | t      |          | Concluded           |              |
|     |   |  |          |                     | City               | State  | Zip Code | •                   |              |
| ä   | Yes. Fill in the inform  Creditor's Name  Number Street | ation below.                                     |          | Describe the proper |                    |        | Date     | Value of t property | he           |
|     |   |  |          | Property was repo   | ossessed.          |        |          |                     |              |
|     |   |  |          | Property was fore   |                    |        |          |                     |              |
|     |   |  |          | Property was gar    |                    |        |          |                     |              |
|     | City  | State Zip Co                                     | ode      | Property was atta   | ched, seized, or l | evied. |          |                     |              |
|     |   |  |          | Describe the proper | ty                 |        | Date     | Value of t property | he           |
|     |   |  |          |                     |                    |        |          |                     |              |
|     | Creditor's Name   |  |          |                     |                    |        |          |                     |              |
|     | Number Street   |  |          | Explain what happe  | ned                |        |          |                     |              |
|     | number Street   |  |          | Property was repo   | necessed           |        |          |                     |              |
|     |   |  |          | Property was fore   |                    |        |          |                     |              |
|     |   |  |          | Property was gar    |                    |        |          |                     |              |
|     | City  | State Zip Co                                     | ode      | Property was atta   |                    | evied. |          |                     |              |
|     | ,   | p 0  |          | _ · ′               | •                  |        |          |                     |              |

| Deb  | tor 1    |   | <u>ଏ 06/ଏ୬/k16 Entered </u> 06/ଏନ/ <b>ଏ</b> ୫/ଜୟ:<br>cumenter Page 44 of 70 | 45 Desc                  | <u>Main</u>             |
|------|----------|---|---|--------------------------|-------------------------|
| 11.  |          |   | reditor, including a bank or financial institution, set of                  | f any amounts fr         | om your                 |
|      |          | No<br>Yes. Fill in the details.   |   |                          |                         |
|      |          |   | Describe the action the creditor took                                       | Date action was taken    | Amount                  |
|      |          | Creditor's Name   |   |                          |                         |
|      |          | Number Street   | Last 4 digits of account number: XXXX-                                      |                          |                         |
|      |          | City State Zip Code   |   |                          |                         |
| 12.  |          | nin 1 year before you filed for bankruptcy, was any of iver, a custodian, or another official?        | your property in the possession of an assignee for the                      | e benefit of credi       | tors, a court-appointed |
|      | <b>☑</b> | No<br>Yes   |   |                          |                         |
| Part | 5:       | List Certain Gifts and Contributions  |   |                          |                         |
| 13.  | Wi       | thin 2 years before you filed for bankruptcy, did you only No Yes. Fill in the details for each gift. | give any gifts with a total value of more than \$600 per                    | person?                  |                         |
|      |          | Gifts with a total value of more than \$600 per person  | Describe the gifts  | Dates you gave the gifts | Value                   |
|      |          | Person to Whom You Gave the Gift  |   |                          |                         |
|      |          | Number Street   |   |                          |                         |
|      |          | City State Zip Code  Person's relationship to you   |   |                          |                         |
|      |          | Person to Whom You Gave the Gift  |   |                          |                         |
|      |          | Number Street   |   |                          |                         |
|      |          | City State Zip Code  Person's relationship to you   |   |                          |                         |
|      |          | · · · · · · · · · · · · · · · · · · ·   |   |                          |                         |

|             |                         | FIRST Name   | IVIIddie Name D              | ocument Page 45 of 70  |                                   |                        |
|-------------|-------------------------|--|------------------------------|--|-----------------------------------|------------------------|
| 14.         | With                    | nin 2 years before you filed                         |                              | give any gifts or contributions with a total value of mor  | e than \$600 to ar                | y charity?             |
|             | <b>✓</b>                | No<br>Yes. Fill in the details for each              | h gift or contribution.      |  |                                   |                        |
|             | _                       | Gifts with a total value of r per person             | _                            | Describe the gifts   | Dates you gave the gifts          | Value                  |
|             |                         | Charity's Name                                       |                              | -  |                                   |                        |
|             |                         |  |                              | -  |                                   |                        |
|             |                         | Number Street  |                              | _  |                                   |                        |
| Dow         | · C:                    | City State  List Certain Losses                      | Zip Code                     |  |                                   |                        |
| Part<br>15. | With                    |  | or bankruptcy or since y     | ou filed for bankruptcy, did you lose anything because   | of theft, fire, othe              | r disaster, or         |
|             | $\overline{\mathbf{A}}$ | No<br>Yes. Fill in the details.                      |                              |  |                                   |                        |
|             | Ц                       | Describe the property you how the loss occurred      | lost and                     | Describe any insurance coverage for the loss   | Date of your loss                 | Value of property lost |
|             |                         |  |                              | Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property.</i>             |                                   |                        |
|             |                         |  |                              |  |                                   |                        |
| Part        | 7:                      | ist Certain Payments                                 | or Transfers                 |  |                                   |                        |
| 16.         | seek                    | ing bankruptcy or preparin                           | g a bankruptcy petition      | or anyone else acting on your behalf pay or transfer any  <br>?<br>lit counseling agencies for services required in your bankrupto |                                   | ne you consulted about |
|             |                         | No   | position properties, or orea |  | -,-                               |                        |
|             | M                       | Yes. Fill in the details.                            |                              | Description and value of any property transferred  | Date payment or transfer was made | Amount of payment      |
|             |                         | Semrad Law Firm                                      |                              | Attorney's Fee - 300.00  | 6/10/2016                         | \$300.00               |
|             |                         | Person Who Was Paid<br>20 South Clark Street 28th Fl | loor                         | -  |                                   |                        |
|             |                         | Number Street  |                              | _  |                                   |                        |
|             |                         | Chicago Illinois                                     |                              | _  |                                   |                        |
|             |                         | City State   | Zip Code                     | -  |                                   |                        |
|             |                         | Email or website address                             |                              | _  |                                   |                        |
|             |                         | Person Who Made the Payme                            | ent, if Not You              |  | <u> </u><br>                      |                        |
|             |                         | Person Who Was Paid                                  |                              | -  |                                   |                        |
|             |                         | Number Street  |                              | <del>-</del><br>-  |                                   |                        |
|             |                         | City State   | Zip Code                     | -  |                                   |                        |
|             |                         | Email or website address                             |                              | -  |                                   |                        |
|             |                         | Person Who Made the Payme                            | ent, if Not You              |  |                                   |                        |

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| Ľ   | No<br>Yes. Fill in the details.  |          |   |                       |                                   |           |                        |
|-----|--|----------|---|-----------------------|-----------------------------------|-----------|------------------------|
|     |  |          | Description and value of any proper               | erty transferred      | Date payment or transfer was made | Amou      | nt of paymer           |
|     | Person Who Was Paid  |          | -   |                       |                                   |           |                        |
|     | Number Street  |          | -   |                       |                                   |           |                        |
|     | City State   | Zip Code | -   |                       |                                   |           |                        |
|     | lude both outright transfers and transfernsfers that you have already listed on this  No Yes. Fill in the details. |          | ity (such as the granting of a security inte      | erest or mortgage on  | your property). Do                | not incli | ude gifts and          |
|     |  |          | Description and value of any property transferred |                       | property or paymebts paid in exch |           | Date trans<br>was made |
|     | Person Who Received Transfer   |          | -   |                       |                                   |           |                        |
|     | Number Street  |          | -   |                       |                                   |           |                        |
|     | City State<br>Person's relationship to you   | Zip Code | -   |                       |                                   |           |                        |
|     | Person Who Received Transfer   |          | -   |                       |                                   |           |                        |
|     | Number Street  |          | <del>-</del>                                      |                       |                                   |           |                        |
|     | City State Person's relationship to you  | Zip Code | _   |                       |                                   |           |                        |
|     | nese are often called asset-protection de No   |          | u transfer any property to a self-settle          | d trust or similar de | evice of which yo                 | u are a l | beneficiary?           |
|     |  |          | Description and value of the prop                 | erty transferred      |                                   |           | Date trans             |
| (Tr | Yes. Fill in the details.  |          |   |                       |                                   |           | was made               |

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| Debtor 1 | recrecie 426 10-13020     | D0C T       | FIIEU OONESPIETO   | ETTETEU WOOSEIN/UNDEED/IU/DOWA4.43 | Desc Main |
|----------|---------------------------|-------------|--------------------|------------------------------------|-----------|
|          | First Name                | Middle Name | Documente Partie   | Page 47 of 70                      |           |
|          |                           |             | Document           | raye 47 01 70                      |           |
| Part 8:  | List Certain Financial Ac | counts, Ins | truments, Safe Dep | osit Boxes, and Storage Units      |           |

| 20. | or tra | in 1 year before you filed for bankruptcy, were ansferred? de checking, savings, money market, or other financeratives, associations, and other financial institution | cial accounts; certificates of deposit; s                       |                 |                           |   |   |
|-----|--------|---|---|-----------------|---------------------------|---|---|
|     |        | No<br>Yes. Fill in the details.   |   |                 |                           |   |   |
|     | _      |   | Last 4 digits of account number                                 | Type of instrum | account or<br>ent         | Date account<br>was closed,<br>sold, moved,<br>or transferred | Last balance<br>before closing<br>or transfer |
|     |        | Person Who Was Paid   | — XXXX-   | Che             | cking<br>ngs              |   |   |
|     |        | Number Street   | _   |                 | ey market<br>xerage<br>er |   |   |
|     |        | City State Zip Code   | _   |                 |                           |   |   |
|     |        | Person Who Was Paid   | — XXXX-   | Che             | cking<br>ngs              |   |   |
|     |        | Number Street   |   | Brok            | ey market<br>xerage       |   |   |
|     |        | City State Zip Code   |   | Othe            | er<br>Er                  |   |   |
| 1.  | valua  | ou now have, or did you have within 1 year beforbles?  No  Yes. Fill in the details.  | ore you filed for bankruptcy, any s  Who else had access to it? | safe deposit    | box or other depositor    |   | Do you still have it?                         |
|     |        | Name of Financial Institution   | Name  |                 |                           |   | No  |
|     |        | Number Street   | Number Street   |                 |                           |   | Yes   |
|     |        | City State Zip Code   | City State Zip  | p Code          |                           |   |   |
| 22. | Have   | you stored property in a storage unit or place  | other than your home within 1 ye                                | ar before yo    | ou filed for bankruptcy   | ?   |   |
|     | _      | No<br>Yes. Fill in the details.   |   |                 |                           |   |   |
|     |        |   | Who else had access to it?                                      |                 | Describe the contents     | S   | Do you still have it?                         |
|     |        | Name of Storage Facility  | Name  |                 |                           |   | ☐ No ☐ Yes                                    |
|     |        | Number Street   | Number Street   |                 |                           |   | <b>□</b> 100                                  |
|     |        | City Charles 77 Oct   | City State Zip  | p Code          |                           |   |   |
|     |        | City State Zip Code   |   |                 |                           |   |   |

| Deb  | tor 1          | LecreciCase 16-19838 Doc 1 First Name Middle Name   | Filed 06/4<br>Docume   |   | ntered 06/1<br>Je 48 of 70   | n7/11-6/09:24:45 Desc Mai                               | <u>1</u>        |
|------|----------------|---|--|---|--|---|-----------------|
| Part | 9:             | Identify Property You Hold or Contro  | I for Some   | ne Else   |  |   |                 |
| 23.  | Do y           | you hold or control any property that someone  No  Yes. Fill in the details.  | e else owns? l   | nclude any pro  | perty you borro  | wed from, are storing for, or hold in tru               | st for someone. |
|      | ш              | res. I ill ill the details.   | Where is th  | e property?   |  | Describe the contents                                   | Value           |
|      |                | Owner's Name  | Number Stre  | eet   |  | -   |                 |
|      |                | Number Street   |  |   |  | -   |                 |
|      |                |   |  | Otala   | 7.0.1.   | -   |                 |
|      |                | City State 7in Code   | City<br>–  | State   | Zip Code   |   |                 |
|      |                | City State Zip Code   |  |   |  |   |                 |
|      |                | Give Details About Environmental In urpose of Part 10, the following definitions apply:   | itormation   |   |  |   |                 |
|      | ha in S. or to | nvironmental law means any federal, state, or local azardous or toxic substances, wastes, or material including statutes or regulations controlling the clear ite means any location, facility, or property as defined used to own, operate, or utilize it, including disposal azardous material means anything an environment axic substance, hazardous material, pollutant, contain I notices, releases, and proceedings that you know any governmental unit notified you that you remain the details.  Name of site  Number Street | nto the air, land,<br>nup of these sul<br>ed under any en<br>sal sites.<br>tal law defines a<br>aminant, or simil<br>v about, regardle | , soil, surface was bstances, waste vironmental law, s a hazardous w lar term. ess of when they or potentially liantal unit | ter, groundwater, s, or material. whether you now aste, hazardous soccurred. | or other medium, own, operate, or utilize it substance, | Date of notice  |
|      |                |   | _  |   |  | _   |                 |
|      |                | 0:  | City<br>-  | State   | Zip Code   |   |                 |
|      |                | City State Zip Code   |  |   |  |   |                 |
| 25.  | Hav            | e you notified any governmental unit of any re  No  Yes. Fill in the details.   | elease of hazar  | rdous material?   | •  |   |                 |
|      |                |   | Governmen  | ntal unit   |  | Environmental law, if you know it                       | Date of notice  |
|      |                | Name of site  | Government   | al unit   |  | -   |                 |
|      |                | Number Street   | Number Stre  | eet   |  | -   |                 |
|      |                | City State Zip Code   | City   | State   | Zip Code   | -   |                 |
|      |                | Zip oodo  |  |   |  |   |                 |

| Debto  | r 1      | Lecreci©ase 16-19838 First Name                                  |                     |                                  | <u>Entered</u> 06√1√7<br>Page 49 of 70 | 1/16 (09:24: <u>45</u> | Desc Main   |
|--------|----------|--|---------------------|----------------------------------|--|------------------------|---|
| 26. l  | Hav      | e you been a party in any judici                                 | al or administrativ | e proceeding under               | any environmental law                  | ? Include settlements  | and orders.   |
| ļ      | <b>✓</b> | No<br>Yes. Fill in the details.                                  |                     |                                  |  |                        |   |
| ١      | _        | res. I ili ili tile details.                                     | C                   | ourt or agency                   |  | Nature of the case     | Status of the case  |
|        |          | Case title   |                     |                                  |  |                        | Pending   |
|        |          |  | (                   | Court Name                       |  |                        | On appeal   |
|        |          | Case number  | <u>_</u>            | lumber Street                    |  |                        | Concluded   |
|        |          |  | Ō                   | ity Stat                         | e Zip Code                             |                        |   |
| Part 1 | 1:       | Give Details About Your  | Business or Co      | nnections to A                   | ny Business                            |                        |   |
| 27.    | With     | nin 4 years before you filed for b                               | bankruptcy, did yo  | ı own a business or              | have any of the follow                 | ing connections to an  | y business?   |
|        |          | A sole proprietor or self-emp                                    |                     |                                  | •                                      | -time                  |   |
|        |          | A member of a limited liability  A partner in a partnership      | y company (LLC) or  | limited liability partne         | rship (LLP)                            |                        |   |
|        |          | An officer, director, or manag                                   | -                   |                                  |  |                        |   |
| ı      | ./       | An owner of at least 5% of the No. None of the above applies. Go |                     | cuniles of a corporati           | OH                                     |                        |   |
| į      |          | Yes. Check all that apply above ar                               |                     | elow for each business           | S.                                     |                        |   |
|        |          |  |                     | Describe the na                  | ture of the business                   |                        | entification number Do not<br>al Security number or ITIN. |
|        |          | Business Name  |                     | _                                |  | EIN:                   |   |
|        |          | Number Street  |                     | Name of accountant or bookkeeper |  | Dates busine           | ess existed   |
|        |          | City State   | Zip Code            |                                  |  | From                   | То  |
|        |          |  |                     |                                  |  |                        |   |
|        |          |  |                     | Describe the na                  | ture of the business                   |                        | entification number Do not<br>al Security number or ITIN. |
|        |          | Business Name  Number Street                                     |                     | _                                |  | EIN:                   |   |
|        |          |  |                     | Name of accou                    | ntant or bookkeeper                    | Dates busine           | ess existed   |
|        |          | City State   | Zip Code            |                                  |  | From                   | То  |
|        |          |  |                     |                                  |  |                        |   |
|        |          |  |                     | Describe the na                  | ture of the business                   |                        | entification number Do not all Security number or ITIN.   |
|        |          | Business Name  |                     | _                                |  | EIN:                   |   |
|        |          | Number Street  |                     | _                                |  |                        | ess existed   |
|        |          |  |                     | Name of accou                    | ntant or bookkeeper                    | _                      | T.  |
|        |          | City State   | Zip Code            |                                  |  | From                   | То  |
|        |          |  |                     |                                  |  |                        |   |

| Debtor   |   | led 06/1437/16 Entered 06/147/146/09/24:45 Desc Main   |
|----------|---|--|
|          | First Name Middle Name  | Document Page 50 of 70   |
|          | ithin 2 years before you filed for bankruptcy, did yo<br>editors, or other parties.                               | ou give a financial statement to anyone about your business? Include all financial institutions,   |
| <u> </u> | No Yes. Fill in the details below.  |  |
| _        |   | Date issued  |
|          | Name  | MM/DD/YYYY   |
|          | Number Street   |  |
|          | City State Zip Code   |  |
| Part 12  | : Sign Below  |  |
| and      | I correct. I understand that making a false stateme   | I Affairs and any attachments, and I declare under penalty of perjury that the answers are true nt, concealing property, or obtaining money or property by fraud in connection with a mprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|          | Signature of Debtor 1   | Signature of Debtor 2  |
|          |   | Date   |
|          | Date 6/17/2016  |  |
| Did      |   | Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?   |
| Did      |   | Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?   |
| Did      | you attach additional pages to Your Statement of  | Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?   |
| <b>✓</b> | you attach additional pages to Your Statement of No   |  |
| <b>✓</b> | you attach additional pages to Your Statement of<br>No<br>Yes   | torney to help you fill out bankruptcy forms?  |
| <b>✓</b> | you attach additional pages to Your Statement of<br>No<br>Yes<br>you pay or agree to pay someone who is not an at |  |

## **UNITED STATES BANKRUPTCY COURT**

|      | North  | ern district of illinois                        |                              |
|------|--|---|------------------------------|
| n re | Lecrecia Nesbit  | Case No.  |                              |
|      | Debtor   |   | (If known)                   |
|      |  | Chapter   | Chapter 13                   |
| 1.   | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2  |   | abovenamed debtor(s) and tha |
|      | compensation paid to me within one year before the rendered or to be rendered on behalf of the debtor(   |   |                              |
|      | For legal services, I have agreed to accept  |   | \$4,000.                     |
|      | Prior to the filing of this statement I have received  |   | \$300.0                      |
|      | Balance Due  |   | \$3,700.0                    |
| 2.   | The source of the compensation paid to me was:   |   |                              |
|      | <b>✓</b> Debtor Oth  | er (specify)                                    |                              |
| 3.   | The source of the compensation paid to me is:  |   |                              |
|      | <b>✓</b> Debtor Oth  | er (specify)                                    |                              |
| 4.   | I have not agreed to share the above-disclosed members and associates of my law firm.  | compensation with any other person unless th    | ey are                       |
|      | I have agreed to share the above-disclosed cormembers or associates of my law firm. A copy the people sharing in the compensation, is attached | of the agreement, together with a list of the n |                              |
| 5.   | In return for the above-disclosed fee, I have agreed a. Analysis of the debtor's financial situation, a bankruptcy;                            |   |                              |
|      | b. Preparation and filing of any petition, sched   | ules, statements of affairs and plan which may  | be required;                 |
|      | c. Representation of the debtor at the meeting   | of creditors and confirmation hearing, and any  | adjourned hearings thereof;  |
|      | d. Representation of the debtor in adversary p   | oceedings and other contested bankruptcy ma     | tters;                       |
| 6.   | By agreement with the debtor(s), the above-disclos   | ed fee does not include the following services: |                              |
|      |  |   |                              |
|      |  | CERTIFICATION                                   |                              |
|      | I certify that the foregoing is a complete statement of debtor(s) in this bankruptcy proceedings.  | f any agreement or arrangement for payment      | to me for representation of  |
|      | 6/17/2016  | /s/ Sean McNulty                                |                              |
|      | Date   | Signature of Attorney                           |                              |
|      |  | Command Law Firm                                |                              |
|      |  | Semrad Law Firm                                 |                              |

Name of law firm

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

## This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

## **Chapter 7: Liquidation**

|   | \$245 | filing fee         |
|---|-------|--------------------|
|   | \$75  | administrative fee |
| + | \$15  | trustee surcharge  |
|   | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

# Case 16-19838 Doc 1 Filed 06/17/16 Document

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

## Chapter 11: Reorganization

|   | \$1,167 | filing fee         |
|---|---------|--------------------|
| + | \$550   | administrative fee |
|   | \$1,717 | total fee          |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

## **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   |       | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

## Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

# Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

# Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

# Case 16-19838 Doc 1 Filed 06/17/16 Entered 06/17/16 09:24:45 Desc Main UNITED STATES BANKBURG OF POURT Northern District of Illinois

| In re: | Nesbit, Lecrecia                                 | Case No                                  |                                       |  |  |  |  |  |
|--------|--|--|---------------------------------------|--|--|--|--|--|
|        | Debtor(s)  |  |                                       |  |  |  |  |  |
|        |  | Chapter.                                 | Chapter13                             |  |  |  |  |  |
|        | VERIFICATION OF CREDITOR MATRIX                  |  |                                       |  |  |  |  |  |
|        | The above named Debtors hereby verify that the a | ttached list of creditors is true and co | rrect to the best of their knowledge. |  |  |  |  |  |
|        |  |  |                                       |  |  |  |  |  |
|        |  |  |                                       |  |  |  |  |  |
| Date:  | 6/17/2016  | /s/ Nesbit, Lecrecia                     |                                       |  |  |  |  |  |
|        |  | Neshit Lecrecia                          |                                       |  |  |  |  |  |

Signature of Debtor

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Carmax Auto Finance 2040 Thalbro St. Richmond , VA 23230 USA

CHASE AUTO P.O. BOX 901003 CREDIT BUREAU DISP FORT WORTH , TX 76101 USA

PORTFOLIO RECOVERY ASS 120 CORPORATE BLVD STE 1 NORFOLK , VA 23502 USA

MIDLAND FUNDING 8875 AERO DR STE 200 SAN DIEGO , CA 92123 USA

MIDLAND FUNDING 8875 AERO DR STE 200 SAN DIEGO , CA 92123 USA

JEFFERSON CAPITAL SYST 16 MCLELAND RD SAINT CLOUD, MN 56303 USA

PORTFOLIO RECOVERY ASS 120 CORPORATE BLVD STE 1 NORFOLK , VA 23502 USA

SEVENTH AVE 1112 7th Ave Monroe , WI 53566 USA

CONVERGENT OUTSOURCING 800 SW 39TH ST RENTON , WA 98057 USA

CREDIT PROTECTION ASSO PO Box 802068 Dallas , TX 75380 USA

PORTFOLIO RECOVERY ASS 120 CORPORATE BLVD STE 1 NORFOLK , VA 23502 USA

I C SYSTEM INC PO BOX 64378 SAINT PAUL , MN 55164 USA

TORRES CRDIT 27 fairview st suite 301 CARLISLE , PA 17013 USA

GINNY'S INC 1112 7TH AVE POB 2816 MONROE , WI 53566 USA

AFNI, INC. PO BOX 3427 BLOOMINGTON , IL 61702 USA

IDOR PO Box 64338 Chicago , IL 60664 USA

SYNCB/AMAZON PO BOX 965015 ORLANDO , FL 32896 USA

SYNCB/SAMS CLUB 4125 WINDWARD PLAZA ALPHARETTA , GA 30005 USA

WEBBANK/GTN 6250 RIDGEWOOD ROA SAINT CLOUD , MN 56303 USA

| Debtor 1 Lecrecia  | .9838 Doc 1 File  | ed 06/17/16   | Entered 06/17/<br>Page 59 of 70 nu   | 16 09:24:45  | Desc Main  |
|--|---|---|--|--|--|
| First Name   | Middle Name Destions for Reporting P  |   | 1 age 33 01 70   |  |  |
| Part 6: Answer These Que   | 16a. Are your debts possible as "incurred by an No. Go to line Yes. Go to line 16b. Are your debts possible 16b.  | rimarily consuindividual prim<br>16b.<br>17.<br>rimarily busine<br>business or in<br>16c.   | arily for a personal, f<br>ess debts? Business<br>vestment or through  | amily, or househonder debts are debts the operation of t   | that you incurred to<br>he business or   |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?  | paid that funds will No. Yes.   | apter 7. Do you esti  |  |  | and administrative expenses are  |
| 18. How many creditors<br>do you estimate that<br>you owe?   | ✓ 1-49<br>☐ 50-99<br>☐ 100-199<br>☐ 200-999   |   | 1,000-5,000<br>5,001-10,000<br>10,001-25,000   |  | 25,001-50,000<br>50,001-100,000<br>More than 100,000   |
| 19. How much do you estimate your assets to be worth?  | ✓ \$0-\$50,000  ☐ \$50,001-\$100,000  ☐ \$100,001-\$500,000  ☐ \$500,001-\$1 million  |   | \$1,000,001-\$10 millio<br>\$10,000,001-\$50 mil<br>\$50,000,001-\$100 m<br>\$100,000,001-\$500 r                          | lion 🔲 S   | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion   |
| 20. How much do you estimate your liabilities to be?   | ✓ \$0-\$50,000  ☐ \$50,001-\$100,000  ☐ \$100,001-\$500,000  ☐ \$500,001-\$1 million  |   | \$1,000,001-\$10 millio<br>\$10,000,001-\$50 mil<br>\$50,000,001-\$100 m<br>\$100,000,001-\$500 r                          | lion   | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion   |
| Part 7: Sign Below   |   |   |  |  |  |
| For you  | and correct.  If I have chosen to file upon 13 of title 11, United a proceed under Chapter of If no attorney represent fill out this document, I I request relief in accord understand making a ficonnection with a bankror both. 18 U.S.C. §§ 15 | Inder Chapter 7 States Code. I to 7. Is me and I did represented a lance with the calse statement, uptcy case can 12, 1341, 1519, | not pay or agree to pay and read the notice reshapter of title 11, Uniconcealing property, result in fines up to 3 and 357 | ay proceed, if eli available under e ay someone who quired by 11 U.S ted States Code, or obtaining more \$250,000, or impressions. | specified in this petition. ney or property by fraud in isonment for up to 20 years,   |
| gon or all and the state of the |   | 0/2016<br>MM / DD / YYYY  |  | Executed on  | MM / DD / YYYY  as A 1500 Organization for a first all of the control of the cont |

Entered 06/17/16 09:24:45 Case 16-19838 Doc 1 Filed 06/17/16 Desc Main Fill in this information to identify your case: Nesbit Debtor 1 Lecrecia Middle Name Last Name First Name (Spouse, if filing) First Name Middle Name Last Name District of Illinois United States Bankruptcy Court for the: Northern (State) Case number (If known) Check if this is an Official Form 106Dec amended filing **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Part 1: Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Yes. Name of person Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

Signature of Debtor 2

MM/DD/YYYY

Date

/s/ Lecrecia Nesbit

Signature of Debtor 1.

MM/DD/YYYY

Date 6/10/2016

| Debtor 1            | Lecrecia                                  | .6-19838   | Doc 1           | Filed 06/17/16  Document                                       | Entered 06/17/<br>Page 61 of 70 nu                       | 16 09:24:45<br>mber (if known)                   | Desc Main                               |
|---------------------|---|--|-----------------|--|--|--|---|
|                     | First Name                                |  | Middle Name     | 2000: Legithame  | · ago 02 0. 10   |  | S                                       |
|                     | hin 2 years before<br>ditors, or other pa |  | bankruptcy, c   | lid you give a financial s                                     | tatement to anyone abo                                   | ut your business? I                              | nclude all financial institutions,      |
| ☑<br>□              | No<br>Yes. Fill in the deta               | ails below.  |                 |  |  |  |   |
|                     |   |  |                 | Date issued  |  |  |   |
|                     | Name                                      |  |                 | MM/DD/YYYY   |  |  |   |
|                     | Number Street                             |  |                 | · · · · · · · · · · · · · · · · · · ·                          |  |  |   |
|                     |   |  |                 |  |  |  |   |
|                     | City                                      | State  | Zip Co          | ode  |  |  |   |
| Part 12:            | Sign Below                                |  |                 |  |  |  |   |
| and bank            | cruptcy case can r                        | esult in fines of the second s | up to \$250,000 | tement, concealing prop<br>0, or imprisonment for u<br>Muallbk | perty, or obtaining money<br>to to 20 years, or both. 18 | U.S.C. §§ 152, 1341,                             | id in connection with a 1519, and 3571. |
|                     | Signa                                     | ture of Debtor   |                 |  | •  | of Debtor 2                                      |   |
|                     | Date                                      | 6/10/2016  |                 |  | Date   |  |   |
| Did y               | ou attach additio                         | nal pages to `   | Your Stateme    | nt of Financial Affairs fo                                     | r Individuals Filing for E                               | sankruptcy (Official                             | Form 107)?                              |
| SAMPLE OF THE PARTY | No  |  |                 |  |  |  |   |
|                     | Yes                                       |  |                 |  |  |  |   |
| Did y               | ou pay or agree t                         | o pay someor   | ne who is not   | an attorney to help you  | fill out bankruptcy forms                                | ?  |   |
| V                   | No  |  |                 |  |  |  |   |
| 口                   | Yes. Name of perso                        | n  |                 |  |  | ne Bankruptcy Petition<br>tion, and Signature (C | •                                       |
| ٧                   |   |  |                 | glacing with p   | Deciala  | Borr, and Oignatale (C                           | · · · · · · · · · · · · · · · · · · ·   |

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Northern District of Illinois

| In re: | Nesbit, Lecrecia  Debtor(s)                    | Case No  |
|--------|--|--|
|        |  | Chapter. Chapter13   |
| ٠      | VERIFICATION                                   | ON OF CREDITOR MATRIX  |
|        | The above named Debtors hereby verify that the | attached list of creditors is true and correct to the best of their knowledge. |
| Date:  | 6/10/2016                                      | /s/ Nesbit, Lecrecia / Lob / Nesbit, Lecrecia / Signature of Debtor            |

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| £. | eblor   | 1 Lecreci             |  |   | Nesbit  | Case number (/ known)  |  |
|----|---|-----------------------|--|---|---|--|--|
|    |   | 959.401               |  | Middle Name   | Last Name   | e voice of the contract of the | 6 19 7 19 8 19 19 19 19 19 19 19 19 19 19 19 19 19 |
| 1  |   |                       | he median family inco                                    |   | u. Follow these steps:                                |  |  |
|    | 1   | 6a. Fillini           | the state in which you liv                               | е.  | llinois   | <del>_</del>   |  |
|    | 10  | 66. Fill in t         | the number of people in y                                | your household.                                     | 1   | _  |  |
|    | 10  |                       | he median family ncome                                   |   |   |  | <b>\$</b> 49,741.00                                |
|    |   | To find<br>also by    | f a list of applicable medi<br>a available at the bankru | ian income amounts, ç<br>olor dedes offess          | go online using the link s                            | specified in the separate instructions for this form. This list i  | nay  |
| 1  | 7. H  |                       | lines compare?   | picy Gent's Olice,                                  |   |  |  |
|    | 17  | 7a. 🗍 L               | ne 15b is less than or eq                                | ual to line 16c. On the                             | top of page 1 of this form                            | n, check box 1, Disposable income is not determined under  | •11  |
|    | U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2).                 |                       |  |   |   |  |  |
|    | 17  | љ. 🛂 🗆                | ne 15b is more than line                                 | 16c. On the top of page                             | a 1 of this form, check bo                            | ox 2, Disposable income is determined under 11 U.S.C. §  |  |
|    |   | 13                    | 32 <i>5(b)(3</i> ). Go to Part 3 :                       | and fill out Calculati                              | on of Disposable Inco                                 | ome (Official Form 122C-2). On line 39 of that form, copy  | your   |
|    |   | _ cu                  | irrent monthly income fro                                | m line 14 above.                                    |   |  |  |
| P  | art 3:  | Calcul                | ate Your Commitm   | ent Period Unde                                     | r 11 U.S.C, §1325                                     | (b)(4)   |  |
| 18 | 8. C  | opy your f            | total average monthly                                    | income from line 11.                                |   |  | \$5,663.62   |
| 71 | 9, Do   | educt the<br>mmitment | marital adjustment if i<br>period under 11 U.S.C. §      | it applies. If you are n<br>} 1325(b)(4) allows you | namied, your spouse is no<br>to deduct part of your s | not filing with you, and you contend that calculating the pouso's income, copy the amount from fine 13.  |  |
|    | 19  | e. If the m           | naritai adjustment does n                                | of apply, fall in 0 on line                         | 19a.  |  | -\$0.00  |
|    | 19  | b. Subtra             | ct line 19a from line 1                                  | 9.  |   |  | \$5,663.62   |
| 20 | ), Cı   | siculate yo           | our current monthly inc                                  | come for the year. Fo                               | llow these steps:                                     |  |  |
|    | 20  | a. Copylii            | ne 19b,  |   |   |  | \$5,663.62   |
|    |   | Multiply              | by 12 (the number of m                                   | onths in a year).                                   |   |  | x 12   |
|    | 20  | b. The res            | sult is your current month                               | ly income for the year                              | for this part of the form.                            |  | \$67,963.44  |
|    | 20  | c. Copy th            | ne median family income                                  | for your state and size                             | of household from line 1                              | 16c.   | \$49,741.00  |
| 21 | . Ho  | w do the              | lines compare?   |   |   |  |  |
|    |   | Line 205<br>period is | is less than line 20c. Uni<br>3 years. Go to Part 4.     | lass otherwise ordered                              | by the court, on the top                              | of page 1 of this form, check box 3, The commitment  |  |
|    | V   |                       | is more than or equal to<br>ent period is 5 years. Go    |   | wise ordered by the coul                              | rt, on the top of page 1 of this form, check box 4, The  |  |
| Pa | rt 4:   | Sign B                |  |   |   | ***  |  |
|    |   | Rv signir             | na hora. I doctoro martos                                | nanalty of nasions that if                          | han information de ship of                            | atement and in any attachments is true and correct.  |  |
|    |   | D) Digital            | 1910001100001010011                                      | portally of perjuly that i                          | PERIODIRACITED SI                                     | are not a and an any assert the first after alta collect   | ;  |
|    |   | X /s/                 | Lecrecia Mosbit  | Carrie V  | ested x   |  |  |
|    |   | Sign                  | ature of Deblor 1  | a second  |   | Signature of Debtor 2  |  |
|    |   | Date                  | 8/10/2016  |   | 1   | Date   |  |
|    |   |                       | MM/DD/YYYY   |   |   | MM/OD/YYYY   | ŧ  |
|    |   | If wout the           | ecked 17a, do NOT fill o                                 | ut or file Form 1220-2                              |   |  | £  |
|    | If you checked 17h, fill not from 122C2 and file it with this form. On line 30 of that form, your purpose from the 14 above |                       |  |   |   |  |  |

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| Debtor  |  | Matte Name | Neshit    | Case number (s known) |
|---|--|------------|-----------|-----------------------|
| Part 4:   | Sign Below   | W.Da Varie | Last Name |                       |
| By signing here, under penalty of perjury you declare that the information on the statement and in any strachments is true and correct. |  |            |           |                       |
|   | /Locrecia Nost/It  //Locrecia Nost/It  //Locre | us Ausé    |           | of Debtor 2           |
| ' Da  | te 6/10/2016<br>MM/DD/YYYY   |            | Date      | M/DD/YYYY             |

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

## A. BEFORE THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

## THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

### B. AFTER THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

## THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.

- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

# C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
  - Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate

tasks and functions for the attorney amd support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

## E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

## F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$ 310.00
- 3. Before signing this agreement, the attorney has received, \$ 300.00 toward the flat fee, leaving a balance due of \$ 3700.00 ; and \$ 61.76 for expenses, leaving a balance due for the filing fee of \$ 310.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date:

Signed:

Debtor(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.